

File No. Z-18015/1/2016-eGov**GOVERNMENT OF INDIA**

Ministry of Health &amp; Family Welfare (MoHFW)

DOHFW DEPARTMENT

E-HEALTH

---

**SUBJECT****Main Category** :**Sub Category** :**Description** : Matters related to National Identification Number (NIN) implementation.

---

**OTHER DETAILS****Language** :**Remarks** :

Receipt No : 487754/2017/E-GOVERNANCE

लोकप्रिय गोपीनाथ बरदलै क्षेत्रीय मानसिक स्वास्थ्य संस्थान  
तेजपुर: असम: पिन: 784001  
**LGB REGIONAL INSTITUTE OF MENTAL HEALTH**  
(Govt. of India, Ministry of Health and Family Welfare)  
**Post Box No. 15 :: FAX No. (03712) 233623**  
TEZPUR :: 784001 :: ASSAM

No. LGB/ACA/MISC/2537/05/ 624

Dated 14<sup>th</sup> February' 2017

To,


Mr. Jitendra Arora  
Director (eHealth)  
Govt. of India, Ministry of Health & Family Welfare  
Nirman Bhawan (Room 307 D), New Delhi - 110108

Sir,

I am directed to refer to your letter No. Z-18015/1/2016-eGov dated 02.02.2017 and to inform you that Dr. Soumik Sengupta, Assistant Professor of Psychiatry has been nominated to act as Nodal Officer for National Identification Number System. His contact no. and other details are given below.

Dr. Soumik Sengupta  
Pn No. 9864559009  
E.mail- dr.soumiksengupta@lgbrihmh.gov.in

Yours' faithfully,

  
(Dr. A C Sarmah)  
Medical Superintendent  
LGBRIMH, Tezpur

5th Floor Photographs -  
241688 Super 10

Dr. Soumik Sengupta, Assistant Professor, Department of Psychiatry, LGBRIMH,  
Tezpur

AD (eGov)  
AD (MHT)

Receipt No : 487754/2017/E-GOVERNANCE

Facility Name	LGBRIMH, Tezpur
State	Assam
District	Sonitpur
Taluka	-
Block	Tezpur
Facility Type	Mental Health
Latitude	26.6270*N
Longitude	92.8097*E
Altitude	48m (Elavation)
House Number	-
Street	-
Landmark	Near Police Reserve
Locality	Tezpur
Pincode	784001
Landline	03712 232652
In-Charge Mobile	09864559009
Email	lgbrimh@yahoo.co.in
Region Indicator	-
Operation Status	-
Ownership Authority	Central Govt. Institution



## All India Institute of Speech and Hearing

(An autonomous Institute under the  
Ministry of Health and Family Welfare, Govt. of India)  
Center of Excellence - Assessed & accredited by NAAC with 'A' Grade  
ISO 9001: 2008 Certified Institute  
Manasagangothri, Mysuru - 570 006

ಅಖಿಲ ಭಾರತ ವಾಕ್ ಶ್ರವಣ ಸಂಸ್ಥೆ  
ಮಾನಸಗಂಗೋತ್ರಿ, ಮೈಸೂರು - 570 006  
अखिल भारतीय वाक् श्रवण संस्थान  
मानसगंगोत्री, मैसूरु - 570 006

No.SH/Dir/Gen.75/2016-17

14.2.2017

Shri Jitendra Arora  
Director  
Government of India  
Ministry of Health and Family Welfare  
307-D, Nirman Bhavan  
New Delhi - 110 011  
Email: dir.ehealth@gmail.com

Sub: National portal for providing Unique Identification Number - reg.

Ref: Ministry's letter No.Z-180-15/1/2016-eGov dated 2.2.2017

Sir,

This has reference to the letter regarding initiation of a process for providing Unique Identification Number (National Identification Number) for all health facilities in India and launching of national portal (<http://nin.nhp.gov.in>).

In this connection, Dr. Ajish K Abraham, Professor & Head, Department of Electronics is appointed as Nodal Officer for entry of details of all central government hospitals in NIN Portal, as requested by you.

Thanking you and with best regards,

Yours sincerely,

*Savithri S.R.*  
Dr. S.R. Savithri  
Director

*Ad(ehw)*  
*Ad(CHE)*

*Ad*  
*20/4/17*





*Shreed Patil*

**Government of India**  
**OFFICE OF MEDICAL SUPERINTENDENT**  
**ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL**  
**Saket Nagar Bhopal M.P. - 462020**

File Name: 06.9. /MSO/AIIMS BPL/15-16/ Govt. order No. 22951.....

Date: 12/2/17

To  
 Shri Jitendra Arora  
 Director,  
 Ministry of Health & Family Welfare  
 307-D, Nirman Bhavan, New Delhi - 110 011

Sir,

Please refer to your letter No: Z-18015/1/2016 -eGov Dated 02.02.2017. The following desired information in prescribed format regarding AIIMS Bhopal is forwarded for your information and necessary action.

Facility Name	All India Institute of Medical Sciences, Bhopal
State	Madhya Pradesh
District	Bhopal
Taluka	Huzoor
Block	-
Facility Type	Teaching Institute & Hospital
Latitude	23.07 to 23.54
Longitude	77.12 to 77.40
Altitude	Highest 505 Meter above sea level Lowest 180 Meter above sea level
House Number	Nil
Street	Saket Nagar
Landmark	AIIMS itself
Locality	Saket Nagar
Pincode	462 024
Landline	0755-2902607
In-charge Mobile	Jitendra Rathore
Email	jitendra.phlebotomy@aiimsbhopal.edu.in
Regional Indicator	—
Operational Status	Operational
Ownership Authority	Autonomous Body under PMSSY

*h 13/01/17*  
**(Dr. K C TAMARIA)**  
 Medical Superintendent  
 AIIMS Bhopal

*copy to:*

*1. P S to Director, AIIMS Bhopal.*

*MD (elb)*  
*AD (CH)*



Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**National Identification Number (NIN) Portal-reg**

2 messages

**JITENDRA ARORA DIRECTOR** <jitendra.arora@gov.in>

Fri, Feb 3, 2017 at 12:36 PM

To: Med.sup.rmlh@gmail.com, dpgichd@hotmail.com, dpgi@pgimer.edu.in, pgimer-chd@nic.in, sa-nitrd@nic.in, r.sarin@nitrd.nic.in, dr.ahangar@yahoo.co.in, davidumdor@gmail.com, info.neigrihms@nic.in, dirstaff@nimhans.ac.in, directorlhmc@gmail.com, director-lhmc@gov.in, msoffice@vmmc-sjh.nic.in, msofficesjh@gmail.com, director@rims.edu.in, director@jipmer.edu.in, subhashparija@yahoo.co.in, dean@mgims.ac.in, gargbs@gmail.com, secretary@mgims.ac.in, ashwini@mgims.ac.in, sngaur@gmail.com, admin@vpcl.org.in, dram\_cip@rediffmail.com, director@aiishmysore.in, Director.aiims@gmail.com, director@aiimsbhopal.edu.in, dean@aiimsbhubaneswar.edu.in, director@aiimsbhubaneswar.edu.in, director@aiimsjodhpur.edu.in, director@aiimspatna.org, admin@aiimspatna.org, director@aiimsraipur.edu.in, admin@aiimsraipur.edu.in, director@aiimsrishikesh.edu.in, rakeshkumar.aoaiims@gmail.com, skdeuri1956@gmail.com, lgbrimh@yahoo.co.in, aiihph@cal.vsnl.net.in, deepakchaudhary@hotmail.com, drkksinghal@gmail.com

Cc: "Dr. Amit Mishra" <dr.amitmishra@gmail.com>, "Prof. Sarbadhikari" <supten@gmail.com>, Saurabh Kumar <saurabh@nhp.gov.in>, Amit Kumar <amitkumariss34@gmail.com>

Sir/Madam,

I would like to inform you that Ministry of Health & Family Welfare has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts have already been given user rights to add and update facilities and their details.

2. All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth with respect to health facility related information in India.

3. It is also requested to nominate a Nodal Officer from your hospital/institute and also shared the list of the all central government hospitals in attached format at the earliest. For any further queries Dr. Amit Mishra, Project Lead, CHI ([dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com); M-09910011595) may be contacted.

**Please find attached signed copy of DO letter in this regard.**

--

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

D.O letter dated 02.02.17 reg NIN Portal.pdf  
459K

Receipt No : 487754/2017/E-GOVERNANCE

Fri, Feb 3, 2017 at 12:38 PM

JITENDRA ARORA DIRECTOR &lt;jitendra.arora@gov.in&gt;

To: "Dr. Dinesh Chandra Joshi CGHS" &lt;dc.joshi56@nic.in&gt;

Cc: "Prof. Sarbadhikari" &lt;supten@gmail.com&gt;, "Dr. Amit Mishra" &lt;dr.amitmishra@gmail.com&gt;, saubkr@gmail.com, Amit Kumar &lt;amitkumariss34@gmail.com&gt;

Sir,

I would like to inform you that Ministry of Health & Family Welfare has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts have already been given user rights to add and update facilities and their details.

2. All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth with respect to health facility related information in India.

3. It is also requested to nominate a Nodal Officer from CGHS and also shared the list of the all CGHS in attached format at the earliest. For any further queries Dr. Amit Mishra, Project Lead, CHI ([dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com); M-09910011595) may be contacted.

Please find attached signed copy of DO letter in this regard.

-


Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

-

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

 D.O letter to CGHS dated 02.02.17 reg NIN Portal.pdf  
457K

**JITENDRA ARORA**

Director

Tel. : 011-23062317

E-mail : dir.ehealth@gmail.com



सत्यमेव जयते

FTS : 459522

भारत सरकार

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

डी-307, निर्माण भवन, नई दिल्ली - 110011

Government of India

Ministry of Health &amp; Family Welfare

307-D, Nirman Bhavan, New Delhi-11001

No: Z-18015/1/2016-eGov

Date: 02.02.2017

Sir,

I would like to inform you that Ministry of Health & Family Welfare has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts have already been given user rights to add and update facilities and their details.

2. All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth with respect to health facility related information in India.
3. Since CGHS system also holds records of CGHS clinics, the list of the all CGHS is required to be compiled in following format for the purpose mentioned above:

Facility Name	
State	
District	
Taluka	
Block	
Facility Type	
Latitude	
Longitude	
Altitude	
House Number	
Street	
Landmark	
Locality	
Pincode	
Landline	
In-charge Mobile	
Email	
Region Indicator	
Operational Status	
Ownership Authority	

---

**Healthy Village, Healthy Nation**



Receipt No : 487754/2017/E-GOVERNANCE

4. It is also requested to nominate a Nodal Officer from CGHS and also shared the list of the all CGHS in above mentioned format at the earliest. For any further queries Dr. Amit Mishra, Project Lead, CHI ([dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com); M-09910011595) may be contacted.

Yours sincerely,

  
(Jitendra Arora)  
Dr. Dinesh Chandra Joshi,  
Director  
CGHS.Copy to:

Prof. Supten Sarbadhikari, Project Director, CHI, NIHFW

Receipt No : 487754/2017/E-GOVERNANCE

**JITENDRA ARORA**

Director

Tel : 011-23062317

E-mail : dir.ehealth@gmail.com

*Pls issue 2 RT  
By Special Per*



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
डी-307, निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare  
307-D, Nirman Bhavan, New Delhi-110011

No: Z-18015/1/2016-eGov

Date: 02.02.2017

Dear

*Sir/madam,*

I am happy to inform you that Ministry of Health & Family Welfare has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts are given user rights to add and update facilities and their details.

2. All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth with respect to health facility related information in India.

3. In this regard it is requested to appoint a nodal person for entry of details of all central government hospitals in NIN Portal. A list of the all central government hospitals may be compiled in following format and shared with us at the earliest for this purpose.

Facility Name	
State	
District	
Taluka	
Block	
Facility Type	
Latitude	
longitude	
Altitude	
House Number	
Street	
Landmark	
Locality	
Pincode	
Landline	
In-charge Mobile	

*ok***Healthy Village, Healthy Nation**

बेटी बचाओ, बेटी पढ़ाओ  
Talking about AIDS is taking care of each other

Receipt No : 487754/2017/E-GOVERNANCE

Email	
Region Indicator	
Operational Status	
Ownership Authority	

4. For any further queries Dr. Amit Mishra, Project Lead, CHI ([dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com); M-09910011595) may be contacted for clarifications.

Yours sincerely,

  
(Jitendra Arora)

***The Director/Medical Superintendent of Central Government & Autonomous Hospitals.***

**Copy to:**

**Project Director, CHI, NIHFW .**



**Annexure 3: Overall Scope of the NIN Project****I. Problem Statement:**

Public Health System in India currently has various disparate health information systems functioning at central and state level. There is significant difference in the number and type of facilities available with these systems. There is no unique facility data source available in the country – which can be referred and used for data exchange across systems.

**II. VISION OF NIN:**

- a) To develop health facility registry which will act as *single source of truth* in the country for health facilities related data.
- b) To move towards creation of national e-Health architecture of which facility registry is the central component.
- c) Improve e-governance and bring transparency in healthcare system by using NIN for benefits transfer, provider payments, and budgetary allocations, health services planning and management.

**III. Benefits of NIN:****A. Government**

1. **Single source of Truth:** The facility registry will provide standard list of the health facilities in the country and could be used as facility master in all current and prospective central or state public health information systems.
2. **Health Services Planning:** It would be a great tool for program managers for health facility and services planning and organization. Geo-coded facilities database (NIN) would help identify the exact number, location of health facilities in a district and would facilitate prioritization of health infrastructure development in underserved areas, streamlining referrals, organizing outreach services and monitoring of health programs.
3. **Resource/ budget allocation:** Using NIN, facility payments could be tracked and timely resource/budgetary allocation can be ensured to the most granular level.
4. **Improving transparency:** All payments to beneficiaries could be routed using JAM (JanDhan-Aadhar-Mobile) once the NIN is available for all health facilities.
5. **Disaster/epidemic preparedness:** NIN system will help identify facilities with adequate resources to streamline responses in the case of natural/man-made disasters. It will also help in system preparedness for combating epidemic outbreaks.
6. **Research/monitoring:** Unique facility database would help in health systems research and would make it easy to triangulate facility data with



Receipt No : 487754/2017/E-GOVERNANCE

**Larsen & Toubro Limited Engineering Construction & Contracts Division**  
Copyright © 2010 L&T ECC Div All rights reserved

Page No4

Job Address :Larsen &amp; Toubro Ltd,ECC Division AIIMS - BHUBANESWAR Bhubaneswar Orissa Bhubaneswar OR IND01 Bhubaneswar

WO No:E134

WO Date:02 Aug 2011

Amend. No

0 Dt

Vendor Pan No. AADCS3666G

Company Pan No.

AAACL0140P

To

TVS INTERCONNECT SYSTEMS LIMITED  
( MUMBAI )

Job Code

LE100381

Bill Type Running

GUNDECHA ENCLAVE,5C-1 KHERNAI ROAD  
NEXT TO POST OFFICE ANDHERI EAST  
MUMBAI, MAHARASHTRA

Values in

INR

Vendor code: VBT00984

Name of Work

Lv Systems

WO Period

01 Aug 2011 To 31 Jul 2012

Pay. Terms

100 % on Execution with 30 days credit by Cheque - (Stage - 1)

Sl.No	Item Code-Version-Markup	Quantity UOM	Rate	Amount
42	108300000000262 - 1083 - 1 - 0 Supply And Laying Of Multi Mode Fiber Optic Cable & Components Fibre Connectors Sc Connector - Multi Mode (mm)	828 Unit	625	517500
43	108300000000263 - 1083 - 1 - 0 Supply And Laying Of Multi Mode Fiber Optic Cable & Components Fibre Duplex Patch Cords Patch Cord Multi Mode Fiber With Sc Connector On One Side And Requisite Connector On The Other Side (3m) As Compatible With The Switch/device Being Quoted Under Active Components Of This Tender	142 Unit	1100	156200
44	108300000000264 - 1083 - 1 - 0 Supply And Laying Of Mm Fiber Optic Cable & Components Outdoor Fibre Cable - 6 Core Armored Fiber Cable Multi Mode (6 Core) (legrand-ortronics/ Systimax/ Siemon)	3500 Mtr.	135	472500
45	108300000000265 - 1083 - 1 - 0 Supply And Laying Of Mm Fiber Optic Cable & Components Supply, Installation And Fixing Of Gi Pipe Underground And On The Surface 2 Inch	700 Mtr	300	210000
46	108300000000266 - 1083 - 1 - 0 Supply And Laying Of Mm Fiber Optic Cable & Components Excavation & Resurfacing Of Soil Upto 1 Meter Depth	2000 Mtr	100	200000
47	108300000000267 - 1083 - 1 - 0 Supply And Laying Of Mm Fiber Optic Cable & Components Supply & Installation Of Hdpe Pipe (isi/tec Approved) 40/33mm Pib Hdpe Duct	2800 Mtr	55	154000
48	108300000000268 - 1083 - 1 - 0 Supply And Laying Of Mm Fiber Optic Cable & Components Performance Testing And Termination Of Laid Fiber Optic Cable (per Core) For Continuity, Length, & Optical Power Loss As Per Eia/tia 568 & Eia-tia -455-60 And Documentation Of The Results.	894 Nos	300	268200
49	108300000000269 - 1083 - 1 - 0 Supply & Installation Of 19" Surface & Wall Mount Racks With Platform& Proper Support For Brackets, Depth Of Minimum 550mm For Wall Mount Racks & Minimum 600mm For 27u & 800mm For 42u Racks, Racks Filled With Casters, Front & Rear Doors, Power Distribution Unit & Fans. Cable Manager (horizontal & Vertical) And All Other Accessories 9u(for Edge Switches)	66 Unit	6000	396000
50	108300000000270 - 1083 - 1 - 0 Supply & Installation Of 19" Surface & Wall Mount Racks With Platform& Proper Support For Brackets, Depth Of Minimum 550mm For Wall Mount Racks & Minimum 600mm For 27u & 800mm For 42u Racks, Racks Filled With Casters, Front & Rear Doors, Power Distribution Unit & Fans. Cable Manager (horizontal & Vertical) And All Other Accessories 16u(for Distribution Switches)	2 Unit	13000	26000
51	108300000000271 - 1083 - 1 - 0 Supply & Installation Of 19" Surface & Wall Mount Racks With Platform& Proper Support For Brackets, Depth Of Minimum 550mm For Wall Mount Racks & Minimum 600mm For 27u & 800mm For 42u Racks, Racks Filled With Casters, Front & Rear Doors, Power Distribution Unit & Fans. Cable Manager (horizontal & Vertical) And All Other Accessories 42u (for Core Switch)	2 Unit	32000	64000
52	108300000000272 - 1083 - 1 - 0 Site Certification For 20 Yrs. Warranty From Oem	1 Ls	16000	16000
53	108300000000273 - 1083 - 1 - 0 Comprehensive Operation And Maintenance For One Year During Warantee Period.	1 Ls	300000	300000

STDANDARD  
DEDUCTION

TDS Income Tax

2%

other data sources. Most of the components of the rural health statistics could be generated from the system as and when required. It will also help provide denominators for each facility coverage area to help measure progress in population related indicators.

**B. General Public**

1. Providing a search engine on top of facility database would help general public to see choose and locate providers. Additional features such as patient feedback or ratings, appointment scheduling could further facilitate access to health services.
2. Patient would be able to search provider for specific services such as blood bank in case of emergency.
3. Ambulances could choose right set of provider in case of any accident/injury based on primary patient condition assessment.

**C. Business/Private Sector**

1. Since the payment from government would be linked through NIN, it will help improve transparency and trust in the system.
2. Facility registry and integrated systems would facilitate private hospital/facility registration into single system.

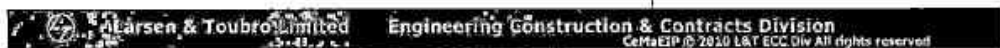
**IV. Current Status:**

As few legacy systems are collecting facility related information into their facility masters, the NIN system was developed using facility master data from Mother Child Tracking System (MCTS). All facilities were given 10 digit unique Identifier, where initial nine digits are random numbers with tenth digit as checksum digit. The data was placed online in NIN Portal (<http://nin.nhp.gov.in>) for verification and confirmation by the state level users. Since States also use HMIS Web Portal for reporting under National Health Mission, the facilities of HMIS were mapped with the NIN database to identify differences in both facility masters. The process was conducted in Excel sheets and was shared with the states for verification and updation of data in NIN Portal. This process is still on and states are correcting data in NIN.

**V. Facility Registry Architecture:**

- The system architecture has following components:
  - a) **NIN Registry (Master Facility Registry)**- Registry database with checks and balances needed for facility database.
  - b) **Lookup Registry**: Where data would be synced through APIs/ Web Services with the legacy systems to flag inconsistencies based on the protocols. Appropriate changes to be made in NIN registry as per protocols.
  - c) **Portals**
    - Portal for enrolling new public and private facilities into NIN.
    - Public Portal for access to NIN data as part of e-governance.

Receipt No : 487754/2017/E-GOVERNANCE



Job Address :Larsen & Toubro Ltd,ECC Division AIIMS - BHUBANESWAR Bhubaneswar Orissa Bhubaneswar OR IND01 Bhubaneswar  
**WO No:**E134 **WO Date:**02 Aug 2011 **Amend. No** 0 **Dt**  
**Vendor Pan No.** AADCS3666G **Company Pan No.** AAACL0140P  
**To** TVS INTERCONNECT SYSTEMS LIMITED **Job Code** LE100381 **Bill Type** Running  
 ( MUMBAI )  
 GUNDECHA ENCLAVE,5C-1 KHERNAI ROAD **Values in** INR **Vendor code:** VBT00984  
 NEXT TO POST OFFICE ANDHERI EAST **Name of Work** Lv Systems  
 MUMBAI, MAHARASHTRA **WO Period** 01 Aug 2011 To 31 Jul 2012

**Pay. Terms** 100 % on Execution with 30 days credit by Cheque - (Stage - 1)

Sl.No	Item Code-Version-Markup	Quantity UOM	Rate	Amount
26	108300000000246 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Network Management Software Firewall (Cybervon/ Sonicwall/ Fortigate/ Netguardian)	2 Nos	300000	600000
27	108300000000247 - 1083 - 1 - 0 Feasibility Study, Site Survey, Project Plan Specifying Layout Plan Of Network Components And Bill Of Material Of The Network Devices & Equipment	1 Ls	50000	50000
28	108300000000248 - 1083 - 1 - 0 Supply & Fixing Of Pvc Duct (pipe) For Utp Cables 1 Inch Dia 2mm Thickness	30240 Mtr	22	665280
29	108300000000249 - 1083 - 1 - 0 Supply & Fixing Of Pvc Duct (pipe) For Utp Cables 1.5 Inch Dia 2mm Thickness	30240 Mtr	30	907200
30	108300000000250 - 1083 - 1 - 0 Supply & Fixing Of Pvc Duct (channel) For Utp Cables 1 Inch	8640 Mtr	25	216000
31	108300000000251 - 1083 - 1 - 0 Supply & Fixing Of Pvc Duct (channel) For Utp Cables 1.5 Inch	8640 Mtr	33	285120
32	108300000000252 - 1083 - 1 - 0 Supply & Fixing Of Pvc Duct (channel) For Utp Cables 2 Inch	8640 Mtr	54	466560
33	108300000000253 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Cat 6a Cable	108000 Mtr	41	4428000
34	108300000000254 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Cat 6a I/o (modular Jack With Face Plate)	1800 Mtr	450	810000
35	108300000000255 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Cat 6a Jack Panel 24 Ports, 19" Rack Mount	75 Unit	13000	975000
36	108300000000256 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Cat 6a Patch Cords (3 Feet)	1800 Unit	550	990000
37	108300000000257 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Cat6 Patch Cords (3 Feet)	1800 Unit	630	1134000
38	108300000000258 - 1083 - 1 - 0 Supply And Fixing Of Utp Cable & Components Testing Of Cables For The Nodes(utp)	1800 Nos	70	126000
39	108300000000259 - 1083 - 1 - 0 Supply And Laying Of Multi Mode Fiber Optic Cable & Components Indoor Fibre Cable - 6 Core Fiber Cable Single Mode (6 Core)	13800 Mtr	105	1449000
40	108300000000260 - 1083 - 1 - 0 Supply And Laying Of Multi Mode Fiber Optic Cable & Components Fibre Lius, 19" Rack Mount 12 Port Lius With Sc Couplers	69 Unit	8250	569250
41	108300000000261 - 1083 - 1 - 0 Supply And Laying Of Multi Mode Fiber Optic Cable & Components Fibre Lius, 19" Rack Mount 24 Port Lius With Sc Couplers	20 Unit	9750	195000

# STDANDARD DEDUCTION

Recommended by For Larsen & Toubro Ltd,ECC Division

# TDS Income Tax

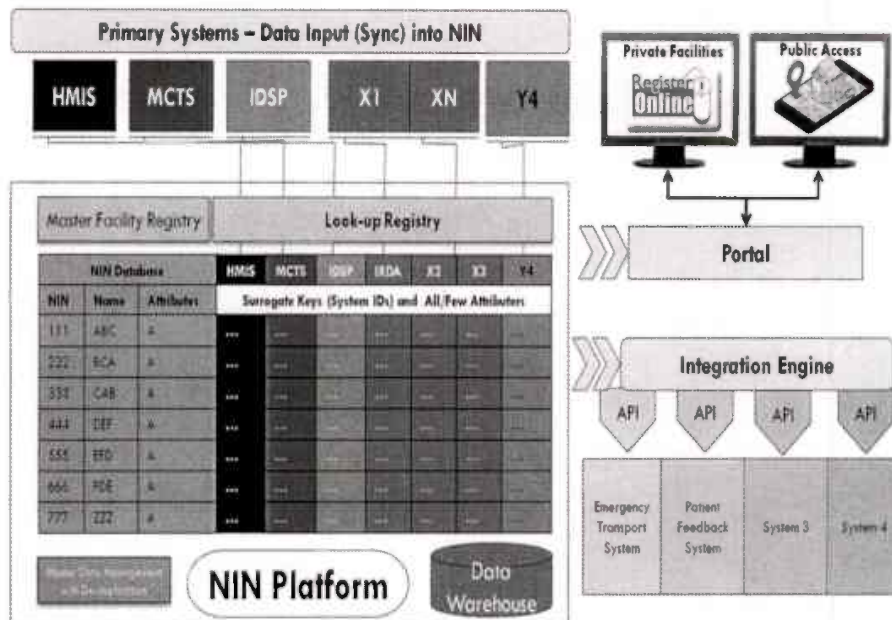
2%

Accepted

Total Amount  
24931572

- d) **Integration engine**- to integrate information systems through APIs/Web Services for using NIN data into their system.

**System Architecture: National Identification Number to Health Facilities in India**



- e) **Validation/deduplication engine**- NIN Portal will be strengthened with the protocols for deduplication and facility data validation.
- f) **Analytics**- Reporting engine built on top of registry for reporting and analytics.

**NIN: Future Tasks:**

- I. **Study of the systems, processes and databases:** which would be required to be synced/integrated with the NIN System i.e. HMIS, MCTS, IDSP, IRDA, Nikshay, Malaria, Clinical Establishment Registration System, RSBY, CGHS, ESI, Railways, Army Medical Services, Health data repository (CBHI) etc.
- II. **System development efforts:** for building facility registry, look-up registry, reporting engine, validation and deduplication engine, integration engine, public portals etc. Integrating various systems and databases for NIN. Rationalization of various processes and development of protocols (technical/ functional) for building NIN registry.
- III. **Data Standards:** Data standards for NIN- The first draft is ready- The subcommittee under MDDS committee is to be constituted for discussion and finalization of facility related standards.

Receipt No : 487754/2017/E-GOVERNANCE

Page No2

Job Address :Larsen &amp; Toubro Ltd,ECC Division AIIMS - BHUBANESWAR Bhubaneswar Orissa Bhubaneswar OR IND01 Bhubaneswar

WO No:E134

WO Date:02 Aug 2011

Amend. No

0 Dt

Vendor Pan No. AACCS3666G

Company Pan No.

AAACL0140P

To

TVS INTERCONNECT SYSTEMS LIMITED  
(MUMBAI)

Job Code

LE100381

Bill Type Running

GUNDECHA ENCLAVE,5C-1 KHERNAI ROAD

Values in

INR

Vendor code: VBT00984

NEXT TO POST OFFICE ANDHERI EAST

Name of Work

Lv Systems

MUMBAI, MAHARASHTRA

WO Period

01 Aug 2011 To 31 Jul 2012

Pay. Terms

100 % on Execution with 30 days credit by Cheque - (Stage - 1)

Sl.No	Item Code-Version-Markup	Quantity UOM	Rate	Amount
13	108300000000233 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Network Management Software Network Management Software With 25 Concurrent User Licenses (cisco/ Enterasys/ Nortel/ Hp/ Openview)	1 Nos	100000	100000
14	108300000000234 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Edge Switch 1 Gb, 1000base-sx-lx/lh, Mm, 1310 Nm Long Wave Length, 2 Km, Lc Sfp For Auditorium And Ayush Buildings.	2 Nos	10000	20000
15	108300000000235 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Edge Switch 1 Gb, 1000base-sx, Ieee 802.3 Mm, 850 Nm Short Wave Length, 220/550 M, Lc Sfp	69 Nos	4000	276000
16	108300000000236 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Edge Switch 48-port 10/100 L2 Poe Switch	6 Nos	40000	240000
17	108300000000237 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Edge Switch 24 Port L2 10/100 Poe Switch	65 Nos	27000	1755000
18	108300000000238 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Distribution Switch For Admin, Library And Lecture Theatre 24 Sfp Switch + 3 Expansion Slots - With Ipv6 Routing License And Power Supply - 2 No. 1 Gb, 1000base-sx, Ieee 802.3 Mm, 850 Nm Short Wave Length, 220/550 M, Lc Sfp- 4 No. 1 Gb, 1000base-sx-lx/lh,mm, 1310 Nm Long Wave Length, 2km,lc Sfp- 1 No. (cisco/ Enterasys/ Nortel)	1 Set	400000	400000
19	108300000000239 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Distribution Switch For Nursing College 24 Sfp Switch + 3 Expansion Slots - With Ipv6 Routing License And Power Supply - 2 No. 1 Gb, 1000base-sx, Ieee 802.3 Mm, 850 Nm Short Wave Length, 220/550 M, Lc Sfp- 5 No. 1 Gb, 1000base-sx-lx/lh,mm, 1310 Nm Long Wave Length, 2km,lc Sfp- 1 No. (cisco/ Enterasys/ Nortel)	1 Set	400000	400000
20	108300000000240 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Core Switch For Medical College Description As Per Item 18.2 Of Boq In The Lot.	1 Set	600000	600000
21	108300000000241 - 1083 - 1 - 0 Supply, Installation, Testing And Commissioning Of Core Switch For Main Hospital Description As Per Item 18.1 Of Boq In The Lot.	1 Set	900000	900000
22	108300000000242 - 1083 - 1 - 0 Supplying And Drawing Following Pair, 0.61 Sq.mm Fr Pvc Insulated Copper Conductor Telephone Cable Surface/ Recessed Steel Conduit As Required (in One Or More Run). 2 Pair Armoured	176720 Mtr	12	2120640
23	108300000000243 - 1083 - 1 - 0 Supplying And Drawing Following Pair, 0.61 Sq.mm Fr Pvc Insulated Copper Conductor Telephone Cable Surface/ Recessed Steel Conduit As Required (in One Or More Run). 50 Pair Armoured	1140 Mtr	200	228000
24	108300000000244 - 1083 - 1 - 0 Supplying And Drawing Following Pair, 0.61 Sq.mm Fr Pvc Insulated Copper Conductor Telephone Cable Surface/ Recessed Steel Conduit As Required (in One Or More Run). 100 Pair Armoured	2300 Mtr	350	805000
25	108300000000245 - 1083 - 1 - 0 Supplying And Drawing Following Pair, 0.61 Sq.mm Fr Pvc Insulated Copper Conductor Telephone Cable Surface/ Recessed Steel Conduit As Required (in One Or More Run). 200 Pair Armoured	2170 Mtr	673	1460410

STANDARD  
DEDUCTION

TDS Income Tax

2%

Recommended by For Larsen &amp; Toubro Ltd,ECC Division

Accepted

Total Amount  
11065162

**Human Resources requirements**

- Following Human Resources would be required to accomplished above mentioned tasks:

Domain	Numbers Required	Salary Range
<b>Technical</b>		
Solution Architect (Team Lead)*	1	1.2 Lakh to 1.7 Lakh per month
Database Administrator	1	70,000 to 1 Lakh per month
Programmer	2	50,000 to 70,000 per month
Tester	1	30,000 to 50,000 per month
<b>Functional</b>		
Functional Healthcare Consultant (Medical/Allied Health background + MHA/MBA)	3	50,000 to 70,000 per month

\* Technical Architect can also be used for IHIP and other exchange projects.

**Timeline**

- I. **System Development:** 6-8 months (including development, testing, deployment etc)
- II. **Integration efforts** (API/Web Services) - 1 month for each system.\*
- III. **Legacy System mapping with NIN:** 1-2 months for each system/databases for study and mapping with NIN.\*

\* Process II & III can be done parallel to process I.

Receipt No : 487754/2017/E-GOVERNANCE

<b>Larsen &amp; Toubro Limited</b>		<b>Engineering Construction &amp; Contracts Division</b>	
CeMaEIP © 2010 L&T ECC Div All rights reserved		Page No1	
Job Address :Larsen & Toubro Ltd,ECC Division AIIMS - BHUBANESWAR Bhubaneswar Orissa Bhubaneswar OR IND01 Bhubaneswar			
WO No:E134	WO Date:02 Aug 2011	Amend. No	0 Dt
Vendor Pan No. AADCS3666G	Company Pan No. AAACL0140P	Job Code	LE100381
To	TVS INTERCONNECT SYSTEMS LIMITED (MUMBAI) GUNDECHA ENCLAVE,5C-1 KHERNAI ROAD NEXT TO POST OFFICE ANDHERI EAST MUMBAI, MAHARASHTRA	Values in	INR
Pay. Terms	100 % on Execution with 30 days credit by Cheque - (Stage - 1)	Name of Work	Lv Systems
		WO Period	01 Aug 2011 To 31 Jul 2012
		Bill Type	Running
		Vendor code:	VBT00984

Sl.No	Item Code-Version-Markup	Quantity UOM	Rate	Amount
1	108300000000221 - 1083 - 1 - 0	253 Nos	94	23782
	Supply And Fixing Of Tv Antenna Socket Outlet Modular Switch/ Socket On The Existing Modular Plate & Switch Box Including Connections But Excluding Modular Plate Etc. As Required.			
2	108300000000222 - 1083 - 1 - 0	253 Nos	90	22770
	Supplying And Fixing Of 1 Or 2 Module (75 Mm X 75mm) Size/ Modules, Gf Box Along With Modular Base & Cover Plate For Modular Switches In Recess Etc As Required.			
3	108300000000223 - 1083 - 1 - 0	5000 Mtr	21	105000
	Supplying And Fixing Of Following Sizes Of Upvc Conduit (heavy Duty) Pipe Alongwith Accessories On Surface/ Recess Including Cutting The Chase In Floor/ Ceiling/ Wall And Making Good The Same As Required. 20 Mm Dia			
4	108300000000224 - 1083 - 1 - 0	3000 Mtr	27	81000
	Supplying And Fixing Of Following Sizes Of Upvc Conduit (heavy Duty) Pipe Alongwith Accessories On Surface/ Recess Including Cutting The Chase In Floor/ Ceiling/ Wall And Making Good The Same As Required. 25 Mm Dia			
5	108300000000225 - 1083 - 1 - 0	415180 Mtr	27	409860
	Supplying And Drawing Of Coaxial Lcg-21 Cable In The Existing Conduit, 300 Pair			
6	108300000000226 - 1083 - 1 - 0	845 Nos	60	50700
	Supplying And Fixing Of Telephone Socket Outlet Modular Switch/ Socket On The Existing Modular Plate & Switch Box Including Connections But Excluding Modular Plate Etc. As Required.			
7	108300000000227 - 1083 - 1 - 0	845 Nos	100	84500
	Supplying And Fixing Of 1 Or 2 Module (75 Mm X 75mm) Size/ Modules, Gf Box Along With Modular Base & Cover Plate For Modular Switches In Recess Etc As Required.			
8	108300000000228 - 1083 - 1 - 0	3 Set	7500	22500
	"supplying And Fixing Following Telephone Tag Block Including Cover Plate Fabricated Out Of 1.6 Mm Thick Ms Sheet Suitable For Housing Following Pair Of Krone Type Connectors Complete As Required. " 300 Pair			
9	108300000000229 - 1083 - 1 - 0	1 Set	4500	54000
	"supplying And Fixing Following Telephone Tag Block Including Cover Plate Fabricated Out Of 1.6 Mm Thick Ms Sheet Suitable For Housing Following Pair Of Krone Type Connectors Complete As Required. " 200 Pair			
10	108300000000230 - 1083 - 1 - 0	7 Set	3000	21000
	"supplying And Fixing Following Telephone Tag Block Including Cover Plate Fabricated Out Of 1.6 Mm Thick Ms Sheet Suitable For Housing Following Pair Of Krone Type Connectors Complete As Required. " 100 Pair			
11	108300000000231 - 1083 - 1 - 0	70 Set	1500	105000
	"supplying And Fixing Following Telephone Tag Block Including Cover Plate Fabricated Out Of 1.6 Mm Thick Ms Sheet Suitable For Housing Following Pair Of Krone Type Connectors Complete As Required. " 50 Pair			
12	108300000000232 - 1083 - 1 - 0	780 Mtr	1000	780000
	Supplying And Drawing Following Pair, 0.61 Sq.mm Fr Pvc Insulated Copper Conductor Telephone Cable Surface/ Recessed Steel Conduit As Required (in One Or More Run). 300 Pair Armoured			

STDANDARD  
DEDUCTIONTDS Income Tax  
2%

Recommended by For Larsen &amp; Toubro Ltd,ECC Division

Accepted

Total Amount  
1760112

<b>Larsen &amp; Toubro Limited</b>		<b>Engineering Construction &amp; Contracts Division</b>	
CeMaEIP © 2010 L&T ECC Div All rights reserved			

Date

Dear Colleagues

I am happy to inform you that Ministry of Health & Family Welfare has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities were allocated unique 13 digit identifiers. The states and districts are given user rights to add and update facilities and their details.

All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth and would provide exact details of all health facilities in India.

To publicize the use of NIN as single source, it is kindly requested that NIN may be used wherever possible for all MoHFW related purposes.

Yours Sincerely

To

1. DGHS, MoHFW
2. AS (NACO), MoHFW
3. JS(ARR)/JS(KCS)/JS(AP)/JS(MJ)/JS(KLS)/JS(DP)/JS(SS)/JS(VG)/JS(KRR)/CD(Stats), MoHFW /
4. JS, Department of Health Research, MoHFW
5. Director, CGHS, MoHFW
6. Dir (NVBDCP) / DDG (RNTCP) / DDG (NPCB) / DDG (NLEP)
7. NPO (IDSP)



**T V SUNDARAM IYENGAR & SONS LIMITED**  
**Balance Sheet as at 31<sup>st</sup> March 2013**
**Notes**      **31.03.2013**      **31.03.2012**  
**Rs. in lakhs**
**EQUITY AND LIABILITIES****Shareholders' funds**

Share capital	2	1144.00	1144.00
Reserves and surplus	3	32307.04	45158.25
<b>Total (A)</b>		<b>33451.04</b>	<b>46302.25</b>

**Non-current liabilities**

Long-term borrowings	4	11196.69	1325.56
Other long-term liabilities	6	243.90	226.99
Long-term provisions	7	458.12	406.81
<b>Total (B)</b>		<b>11898.71</b>	<b>1959.36</b>

**Current liabilities**

Short-term borrowings	5	34564.27	21962.94
Trade payables	8	54414.00	25687.39
Other current liabilities	6	33896.10	22660.15
Short-term provisions	7	13423.62	14172.05
<b>Total (C)</b>		<b>136297.99</b>	<b>84482.53</b>
<b>Total (A+B+C)</b>		<b>181647.74</b>	<b>132744.14</b>

**TOTAL****ASSETS****Non Current assets****Fixed assets**

Tangible assets	9	18903.75	13460.82
Intangible assets	9	281.05	141.84
Capital work-in-progress	9	444.84	546.93
Non-current investments	10	15491.88	15233.89
Deferred tax assets (Net)		39.91	39.91
Long-term loans and advances	11	4163.87	4156.73
<b>Total (A)</b>		<b>39325.30</b>	<b>33580.12</b>

**Current assets**

Inventories	12	53624.00	39846.37
Trade receivables	13	31978.67	25476.67
Cash and cash equivalents	14	12511.31	7909.47
Short-term loans and advances	11	42085.92	24964.22
Other current assets	15	2122.54	967.29
<b>Total (B)</b>		<b>142322.44</b>	<b>99164.02</b>
<b>Total (A+B)</b>		<b>181647.74</b>	<b>132744.14</b>

**TOTAL**
Significant Accounting Policies and  
Notes forming part of the financial statements

1

**R HARESH**  
Managing Director

**R DINESH**  
Jt. Managing Director

**SURESH KRISHNA**  
**S RAM**  
Directors

**B GANAPATHI SARMA**  
Secretary

Chennai  
30.10.2013

Per our Report annexed  
For **SUNDARAM & SRINIVASAN**  
Chartered Accountants  
Firm Registration No.004207S

**K S NARAYANASWAMY**  
Partner  
Membership No.8593

**File Note: NIN**

Ministry of Health & Family Welfare (MoHFW) has initiated a process of providing unique identifiers for all health facilities in India through national NIN Portal ([www.nin.nhp.gov.in](http://www.nin.nhp.gov.in)). National Identification Number is intended to build registry of health facilities in India.

In the first phase of this work all facilities from the Mother Child Tracking System were provided with a 10 digit unique identification number and this data was placed in NIN Portal for verification and confirmation by states (current status of NIN data verification and confirmation is placed in **Annexure-1**).

To further speed-up the verification process, Centre for Health Informatics has conducted mapping of HMIS Facility Master with NIN Facility Master to identify common, unmapped and duplicate facilities. This data was shared with all 36 states for verification and confirmation of data in NIN Portal. As of now 7 states have completed the verification process and confirmed the data in NIN Portal, 12 states have completed verification and currently updating data in NIN Portal. Remaining 16 states are currently verifying the data. Only Maharashtra state is yet to initiate the verification. State-wise verification status is enclosed in **Annexure -2**.

The NIN system is intended to provide various benefits to the Indian Health System. Since NIN (Facility registry) is main component of the national e-health architecture it is important the NIN system is built on the architecture based on standards.

The NIN project scope document which provides details of the NIN architecture is attached in the **Annexure-3**.

To build the NIN architecture following work needs to be accomplished in time bound manner-

- i. **Integration with legacy systems/ databases:** Following systems would be required to be integrated with NIN Portal for maintain uniformity of the facility data in NIN and establish NIN as single source of truth for facility data in India. The initial set of systems/ data sources include HMIS, MCTS, IDSP, , Nikshay, Malaria-NAMMIS, Clinical Establishment Registration System, RSBY, Rohini- IRDA, CGHS, ESI, Railways, Army Medical Services, Health data repository (CBHI) etc.
- ii. **Architectural development efforts** are required for building facility registry, look-up registry, reporting engine, validation and deduplication engine, integration engine, public portals etc. This process also involves development of protocols (technical/ functional) for building NIN registry.

- iii. **Data Standards:** Based on the Metadata and Data Standards Committee's recommendation of facility data standards, the CHI has developed first set of draft Data standards for NIN. The subcommittee under MDDS committee may be constituted for discussion and finalization of facility related standards.

Following timelines would be required for building NIN registry-

- i. **NIN Architecture Development:** 6-8 months (including development, testing, deployment etc)
- ii. **Integration efforts** (API/Web Services) - 1 month for each system.\*
- iii. **Legacy System mapping with NIN:** 1-2 months for each system/databases for study and mapping with NIN.\*

\* Process ii & iii would be taken-up parallel to process i.

To accomplish above mentioned task in the proposed time following human resources is required-

Domain	Numbers Required	Salary Range
<b>Technical</b>		
Technical Architect (Team Lead)*	1	1.2 Lakh to 1.7 Lakh per month
Database Administrator	1	70,000 to 1 Lakh per month
Programmer	2	50,000 to 70,000 per month
Tester	1	30,000 to 50,000 per month
<b>Functional</b>		
Functional Healthcare Consultant (Medical/Allied Health background + MHA/MBA-Healthcare/MPH)	3	50,000 to 70,000 per month

\* Technical Architect can also be used for IHIP and other exchange projects.

The NIN Architecture, project scope document and the human resource requirement are submitted for approval.

PPR

## Annexure 1: NIN Portal-Verified and Confirmed Health facilities

S.No.	State Name	Total	Confirmed by District	Confirmation (%)	Verified by State	Verification (%)
1	Daman & Diu	34	34	100	34	100.0
2	D & Nagar Haveli	92	92	100	92	100.0
3	Puducherry	135	135	100	135	100.0
4	Karnataka	13533	13457	99.4	13445	99.3
5	Sikkim	234	232	99.1	230	98.3
6	Bihar	13608	13433	98.7	12876	94.6
7	Odisha	8605	8471	98.4	8470	98.4
8	Goa	246	242	98.4	242	98.4
9	Maharashtra	13984	13737	98.2	13539	96.8
10	Chhattisgarh	6513	6368	97.8	5795	89.0
11	Madhya Pradesh	10831	10490	96.9	1929	17.8
12	Telangana	6030	5837	96.8	3035	50.3
13	Jharkhand	4846	4471	92.3	674	13.9
14	Chandigarh	71	65	91.5	65	91.5
15	Delhi	3242	2896	89.3	188	5.8
16	Rajasthan	19449	16956	87.2	16335	84.0
17	Tamil Nadu	13049	11172	85.6	11171	85.6
18	Gujarat	10625	8450	79.5	0	0.0
19	Uttar Pradesh	29114	23148	79.5	21820	74.9
20	Nagaland	792	567	71.6	516	65.2
21	Tripura	1166	789	67.7	2	0.2
22	Andhra Pradesh	9691	6508	67.2	1484	15.3
23	West Bengal	11676	7228	61.9	1752	15.0
24	Haryana	3864	2369	61.3	2284	59.1
25	Manipur	526	273	51.9	273	51.9
26	Kerala	7074	3106	43.9	0	0.0
27	Mizoram	542	221	40.8	79	14.6
28	Jammu & Kashmir	3567	1103	30.9	0	0
29	Uttarakhand	2501	628	25.1	0	0.0
30	Punjab	3878	302	7.8	285	7.3
31	Himachal Pradesh	2992	5	0.2	5	0.2
32	Arunachal Pradesh	806	0	0.0	0	0.0
33	Meghalaya	785	0	0.0	0	0.0
34	Assam	6699	0	0.0	0	0.0
35	Lakshadweep	25	0	0.0	0	0.0
36	Andman & Nicobar	165	0	0.0	0	0.0
	<b>India</b>	<b>210990</b>	<b>162785</b>	<b>77.2</b>	<b>116755</b>	<b>55.3</b>

Annexure-2 HMIS-MCTS Mapping Verification Status 5 <sup>th</sup> August 2016			
	State	5th August 2016	Priority (Level 3-Not yet started; Level 2-Expected to complete by 8th August; Level 1-Near Completion; Level 0-Completed & Closed)
1	Chandigarh	Closed	Level-0
2	D&N Haveli	Closed	Level-0
3	Goa	Closed	Level-0
4	Lakshadweep	Closed	Level-0
5	Odisha	Closed	Level-0
6	Puducherry	Closed	Level-0
7	Daman & Diu	Closed	Level-0
8	Andhra Pradesh	Verification completed but NIN portal updation pernding	Level-1
9	Bihar	Verification completed but NIN portal updation pernding	Level-1
10	Chhattisgarh	Verification completed but NIN portal updation pernding	Level-1
11	Haryana	Verification completed but NIN portal updation pernding	Level-1
12	Madhya Pradesh	Verification completed but NIN portal updation pernding	Level-1
13	Manipur	Verification completed but NIN portal updation pending	Level-1
14	Nagaland	Verification completed but NIN portal updation pending	Level-1
15	Punjab	Verification completed but NIN portal updation pending	Level-1
16	Rajasthan	Verification completed but NIN portal updation pending	Level-1
17	Tamilnadu	Verification completed but NIN portal updation pending	Level-1
18	Telangana	Verification completed but NIN portal updation pernding	Level-1
19	Tripura	Verification completed but NIN portal updation pending	Level-1
20	Uttarakhand	upto 50% districts verified	Level-1
21	Andaman& Nicobar	upto 50% districts verified	Level-2
22	Arunanchal Pradesh	upto 50% districts verified	Level-2
23	Assam	upto 50% districts verified	Level-2
24	Delhi	Started Verification	Level-2
25	Gujarat	upto 50% districts verified	Level-2

Receipt No : 487754/2017/E-GOVERNANCE

26	Himachal Pradesh	started Verification	Level-2
27	Jharkhand	upto 50% districts verified	Level-2
28	Karnataka	Started Verification	Level-2
29	Mizoram	Started Verification	Level-2
30	Sikkim	upto 50% districts verified	Level-2
31	Uttar Pradesh	Started Verification	Level-2
32	West Bengal	started Verification	Level-2
33	Jammu&Kashmir	Started Verification- Jammu Division	Level-2
34	Kerala	Started Verification	Level-2
35	Meghalaya	Started Verification	Level-2
36	Maharashtra	Yet to start	Level-3

**Annexure 3: Overall Scope of the NIN Project****I. Problem Statement:**

Public Health System in India currently has various disparate health information systems functioning at central and state level. There is significant difference in the number and type of facilities available with these systems. There is no unique facility data source available in the country – which can be referred and used for data exchange across systems.

**II. VISION OF NIN:**

- a) To develop health facility registry which will act as *single source of truth* in the country for health facilities related data.
- b) To move towards creation of national e-Health architecture of which facility registry is the central component.
- c) Improve e-governance and bring transparency in healthcare system by using NIN for benefits transfer, provider payments, and budgetary allocations, health services planning and management.

**III. Benefits of NIN:****A. Government**

1. **Single source of Truth:** The facility registry will provide standard list of the health facilities in the country and could be used as facility master in all current and prospective central or state public health information systems.
2. **Health Services Planning:** It would be a great tool for program managers for health facility and services planning and organization. Geo-coded facilities database (NIN) would help identify the exact number, location of health facilities in a district and would facilitate prioritization of health infrastructure development in underserved areas, streamlining referrals, organizing outreach services and monitoring of health programs.
3. **Resource/ budget allocation:** Using NIN, facility payments could be tracked and timely resource/budgetary allocation can be ensured to the most granular level.
4. **Improving transparency:** All payments to beneficiaries could be routed using JAM (JanDhan-Aadhar-Mobile) once the NIN is available for all health facilities.
5. **Disaster/epidemic preparedness:** NIN system will help identify facilities with adequate resources to streamline responses in the case of natural/man-made disasters. It will also help in system preparedness for combating epidemic outbreaks.
6. **Research/monitoring:** Unique facility database would help in health systems research and would make it easy to triangulate facility data with

other data sources. Most of the components of the rural health statistics could be generated from the system as and when required. It will also help provide denominators for each facility coverage area to help measure progress in population related indicators.

#### B. General Public

1. Providing a search engine on top of facility database would help general public to see choose and locate providers. Additional features such as patient feedback or ratings, appointment scheduling could further facilitate access to health services.
2. Patient would be able to search provider for specific services such as blood bank in case of emergency.
3. Ambulances could choose right set of provider in case of any accident/injury based on primary patient condition assessment.

#### C. Business/Private Sector

1. Since the payment from government would be linked through NIN, it will help improve transparency and trust in the system.
2. Facility registry and integrated systems would facilitate private hospital/facility registration into single system.

#### IV. Current Status:

As few legacy systems are collecting facility related information into their facility masters, the NIN system was developed using facility master data from Mother Child Tracking System (MCTS). All facilities were given 10 digit unique Identifier, where initial nine digits are random numbers with tenth digit as checksum digit. The data was placed online in NIN Portal (<http://nin.nhp.gov.in>) for verification and confirmation by the state level users. Since States also use HMIS Web Portal for reporting under National Health Mission, the facilities of HMIS were mapped with the NIN database to identify differences in both facility masters. The process was conducted in Excel sheets and was shared with the states for verification and updation of data in NIN Portal. This process is still on and states are correcting data in NIN.

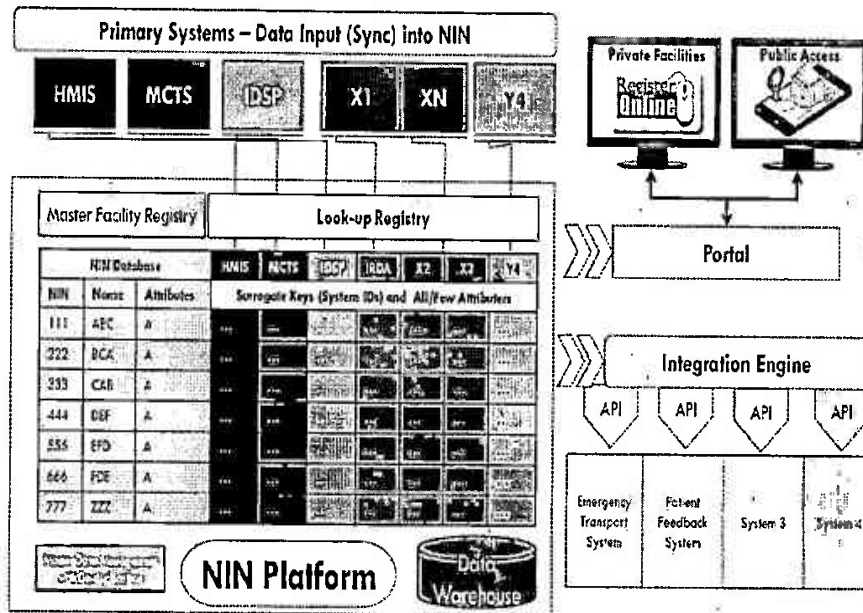
#### V. Facility Registry Architecture:

- The system architecture has following components:
  - a) **NIN Registry (Master Facility Registry)**- Registry database with checks and balances needed for facility database.
  - b) **Lookup Registry**: Where data would be synced through APIs/ Web Services with the legacy systems to flag inconsistencies based on the protocols. Appropriate changes to be made in NIN registry as per protocols.
  - c) **Portals**
    - Portal for enrolling new public and private facilities into NIN.
    - Public Portal for access to NIN data as part of e-governance.



- d) **Integration engine**- to integrate information systems through APIs/Web Services for using NIN data into their system.

System Architecture: National Identification Number to Health Facilities in India



- e) **Validation/deduplication engine**- NIN Portal will be strengthened with the protocols for deduplication and facility data validation.
- f) **Analytics**- Reporting engine built on top of registry for reporting and analytics.

#### NIN: Future Tasks:

- I. **Study of the systems, processes and databases:** which would be required to be synced/integrated with the NIN System i.e. HMIS, MCTS, IDSP, IRDA, Nikshay, Malaria, Clinical Establishment Registration System, RSBY, CGHS, ESI, Railways, Army Medical Services, Health data repository (CBHI) etc.
- II. **System development efforts:** for building facility registry, look-up registry, reporting engine, validation and deduplication engine, integration engine, public portals etc. Integrating various systems and databases for NIN. Rationalization of various processes and development of protocols (technical/ functional) for building NIN registry.
- III. **Data Standards:** Data standards for NIN- The first draft is ready- The subcommittee under MDDS committee is to be constituted for discussion and finalization of facility related standards.

**Human Resources requirements**

- Following Human Resources would be required to accomplished above mentioned tasks:

Domain	Numbers Required	Salary Range
<b>Technical</b>		
Technical Architect (Team Lead)*	1	1.2 Lakh to 1.7 Lakh per month
Database Administrator	1	70,000 to 1 Lakh per month
Programmer	2	50,000 to 70,000 per month
Tester	1	30,000 to 50,000 per month
<b>Functional</b>		
Functional Healthcare Consultant (Medical/Allied Health background + MHA/MBA)	3	50,000 to 70,000 per month

\* Technical Architect can also be used for IHIP and other exchange projects.

**Timeline**

- I. **System Development:** 6-8 months (including development, testing, deployment etc)
- II. **Integration efforts** (API/Web Services) - 1 month for each system.\*
- III. **Legacy System mapping with NIN:** 1-2 months for each system/databases for study and mapping with NIN.\*

\* Process II & III can be done parallel to process I.



Government of Jharkhand  
Jharkhand Rural health Mission Society  
Department of Health, Medical Education & Family Welfare  
Namkum, Ranchi

Phone No. – 2261000, 2261002 Fax No. – 2261856, Email - [nrhmi@jharkhand3@gmail.com](mailto:nrhmi@jharkhand3@gmail.com)

Letter No.

2771 (MD)

Ranchi, Dated: 4/8/2016

From,

**Dr. Amitabh Kaushal, IAS**  
Mission Director

To,

**Mr. Sunil Sharma,**  
Joint Secretary,  
Ministry of Health & Family Welfare,  
Government of India  
Nirman Bhavan, New Delhi-110011

Office of Joint Secretary (HS)

FTS No. 335654/16

Date: 10/8/16

Subject: Regarding D.O.No.Z-18015/1/2016-eGov, Dated 19<sup>th</sup> July, 2016

Sir,

With reference to the above mentioned subject, this is to inform you that, the state is in the process of verification of HMIS & MCTS facilities with NIN Database.

(Mission Director)  
NHM, Jharkhand

Memo No. 2771 (MD)

Date: 4/8/2016

CC : Additional Chief Secretary, Department of Health Medical Education & Family Welfare, GoJ for information.

(Mission Director)  
NHM, Jharkhand

*MD*  
*Dr/Chw*

*Dr/Chw*

*Dr/Chw*

*Dr/Chw*  
10/8/16



Office of Joint Secretary (SC)

File No. 333004/16

Date: 8/8/16

Mission Director, NHM & Special Secretary  
Medical, Health & Family Welfare  
Swasthya Bhawan  
Tilak Marg, Jaipur (Raj.) 302005  
Phone: 0141-2221590 Fax : 0141-2225827

No. F 10 (1) DEO/FW/HMIS/2009/ 556

Date: 4-8-2016

Dear Sh. Sharma Sir,

I would like to draw your kind attention towards your D.O. letter Z-18015/1/2016-e-Gov dated 19 July, 2016. We have mapped and verified most of state health facilities on the NIN portal. As per given directions the HMIS & MCTS master sheets (.xls) shared by you have also been updated and sent to GoI on 21.7.2016 for 28 districts & assured that those of remaining districts will be forwarded very soon.

The same issue was discussed with our state officials by GoI representatives & instructed that some new updated features are provided on NIN portal & now health facilities need to be updated accordingly.

Thus, it is requested we need 7 days to complete the above mentioned task.

Regards,

*(Handwritten signature)*  
Dhr(e-gov)  
Sir

*(Handwritten signature)*  
Regards,

Yours sincerely,

*(Handwritten signature)*  
(Naveen Jain)  
Special Secretary &  
Mission Director, NHM

Shri Sunil Sharma, IRPS  
Jt. Secretary  
Ministry of Health & Family Welfare  
Nirman Bhawan,  
New Delhi 110 108

*(Handwritten signature)*  
AD (CHW)  
*(Handwritten signature)*  
AD (CHW)

**Z-18015/1/2016-eGov**  
**Government of India**  
**Department of Health & Family Welfare**  
**(e-Governance Division)**  
\*\*\*\*

Nirman Bhawan, New Delhi

Dated 22<sup>th</sup> July, 2016

To

Prof. S N Sarbadhikari  
Project Director,  
Centre for Health Informatics  
NIHFW, New Delhi

**Subject: Release of Payment to NHSRC for two months extension (from 5<sup>th</sup> June to 5<sup>th</sup> August 2016) for Facility Master Data Integration of HMIS and MCTS Portal for implementation of NIN to all health facilities across India.**

Sir,

This is with reference to your letter No NIHFW/CHI/NIN/FT/2016 dated 13<sup>th</sup> July 2016 regarding the payment to NHSRC for two months extension for Facility Master Data Integration of HMIS and MCTS Portal.

2. It is informed that MoHFW has already approved the extension till 5<sup>th</sup> August 2016. Kindly release the amount of Rs. 8,01,900/- as two months cost of the extension of this assignment to NHSRC.
3. NHSRC may be requested to complete the assigned task within the extended period i.e. by 5<sup>th</sup> August 2016 and no further extension shall be given.

Yours Sincerely,

  
(Jitendra Arora)  
Director, MoHFW  
Tel: 23062317

Copy to:

Director, NIHFW, New Delhi

o/c

Receipt No : 487754/2017/E-GOVERNANCE

Subject: Release of Payment to NHSRC for two months extension (from 5th June to 5th August 2016) for Facility Master Data Integration of HMIS and MCTS Portal for implementation of NIN to all health facilities across India.

Date: 07/28/16 03:00 PM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;

To: supten@gmail.com, supten@nihfw.org

Cc: director@nihfw.org, Jitendra Arora &lt;jitendra.arora@gov.in&gt;, aantika1@nihfw.org

---

Release of payment to NHSRC for two months extensi... (329kB)

Sir,

This is with reference to your letter No NIHFW/CHI/NIN/FT/2016 dated 13th July 2016 regarding the payment to NHSRC for two months extension for Facility Master Data Integration of HMIS and MCTS Portal.

2. It is informed that MoHFW has already approved the extension till 5th August 2016. Kindly release the amount of Rs. 8,01,900/- as two months cost of the extension of this assignment to NHSRC.

3. NHSRC may be requested to complete the assigned task within the extended period i.e. by 5th August 2016 and no further extension shall be given.

please find attached the signed copy of the letter.

—  
Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health &amp; Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011

Tel: 011 – 2306 2263

Mobile: 9582861973

राष्ट्रीय स्वास्थ्य एवं परिवार कल्याण संस्थान  
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन एक स्वायत्तशासी संस्थान)



National Institute of Health and Family Welfare  
(An Autonomous Institute under Ministry of Health & Family Welfare, Government of India)

बाबा गंगनाथ मार्ग, मुनीरका, नई दिल्ली-110067  
दूरभाष (कार्यालय): 91-11-26165959, 26166441, 26188485, 26107773  
फैक्स: 91-11-26101623 • तार: स्वस्थ परिवार  
ई मेल: info@nihfw.org • वेब साइट: www.nihfw.org

Baba Gangnath Marg, Munirka, New Delhi-110 067  
Phones: 91-11-26165959, 26166441, 26188485, 26107773  
Fax: 91-11-26101623 • Gram: SWASTH PARIVAR  
E.Mail: info@nihfw.org • Web Site: www.nihfw.org

Dated: 13<sup>th</sup> July 2016  
No. NIHFW/CHI/NIN/FT/2016

To

Shri Jitendra Arora  
Director (e-Gov),  
Ministry of Health Family Welfare,  
307 D, Nirman Bhawan, New Delhi.

**Subject: Approval of funds for NHSRC, New Delhi regarding mapping of MCTS and HMIS Facility Master - reg.**

Sir,

This is in reference to the National Health System Resource Centre (NHSRC) letter No-NHSRC/15-16/HMIS/07 dated 1<sup>st</sup> July 2016 for release of Rs. 8,01,900 as cost of the extension of the above subject (Copy enclosed). The NHSRC was engaged for the Facility Master Data integration of HMIS-MCTS Portal for effective implementation of NIN-to-HFI for two months (From 5<sup>th</sup> April 2016 to 5<sup>th</sup> June 2016). The payment of Rs. 8,01,900/- for two months of the contract to NHSRC was made from CHI to NHSRC on 22nd April 2016, based on the MoHFW letter No: Z-18015/1/2016-eGov dated: 7<sup>th</sup> April 2016 (Copy enclosed).

As per the letter No. Z-18015/1/2016-eGov dated 24<sup>th</sup> June 2016, the MoHFW has given the two months extension of the above assignment (upto 5<sup>th</sup> August 2016) to NHSRC. In the above view, approval is sought for MoHFW for release of Rs. 8,01,900/- as cost of the extension of this assignment.

Submitted for necessary action at your end.

Sincerely yours,

*Sarbadhikari*

[Prof. S N Sarbadhikari]  
Project Director (CHI)



# National Health Systems Resource Centre

Technical Support Institution with National Rural Health Mission  
Ministry of Health & Family Welfare Government of India



File No. NHSRC/15-16/HMIS/07

Date 1/7/2016

To,

Dr. Supten Sarbadhikari  
Project Director (CHI)  
NIHFW Campus, New Delhi

Subject: Release of funds for two months extension of assignment on HMIS-MCTS Mapping for facility master data integration to implement NIN to all health facilities across India.

Ref: Letter Z-18015/1/2016-eGov dated 24<sup>th</sup> June, 2016 of MoHFW and NHSRC letter dated 31/3/2016

Dear Sir,

eGovernance division of MoHFW has approved two months extension for the "Facility master data integration of MCTS & HMIS Portal for implementation of NIN assignment being carried out by NHSRC till 5<sup>th</sup> August 2016.

Based on the cost of the assignment for previous two months (5<sup>th</sup> April 2016 to 5<sup>th</sup> June 2016) the total cost for the work for next two month would remain same as in previous work order (i.e. Rs 8,01,900).

Kindly release the money at the earliest to complete the assignment in stipulated time period

  
Dr. Uddipan Dutta

PAO, NHSRC

Copy to:

1. Shri Jitendra Arora, Director e-Gov MoHFW
2. Mr. Ankit Tripathi, NIN National Coordinator, CHI

Enclosed:

1. GOI letter No. Z-18015/1/2016-eGov dated 24<sup>th</sup> June, 2016
2. NHSRC Letter dated 31/03/2016



File No. Z-18015/1/2016-eGov  
Government of India  
Ministry of Health & Family Welfare  
(eGovernance Section)

Nirman Bhawan, New Delhi  
Dated 07<sup>th</sup> April 2016

To,  
Director, NIHF  
Baba Gang Nath Marg,  
Munirka, New Delhi-110067.

Subject: Engagement of NHRSC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

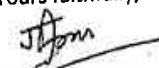
Sir,

Facility Master Data Integration of MCTS and HMIS Portal is necessary for effective implementation of NIN-2-HFI. NHRSC has been a part of implementation of both the system and knows the technical boundaries which these system need to bridge to exchange the data.

2. In this regard, It is suggested that "National Health Systems Resource Centre" (NHRSC), New Delhi may be engaged for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all health facilities across India (copy enclosed).
3. NHRSC has requested the Ministry for a fund of Rs. 8,01,900/- (Rs. Eight Lakh One thousand Nine Hundred Only) for completion of the aforementioned task. Funds have already been allotted to NHP (CHI), NIHF for various eHealth activities including NIN implementation, It is requested to transfer the required funds of Rs 8,01,900/- to National Health System Resource Centre.

This issue with the approval of competent authority.

Yours faithfully,

  
(Jitendra Arora)  
Director (eGovernance)  
MoHFW

Copy to:-

Prof. S. N. Sarbadhikari, Project Director CHI, NIHF

Receipt No : 487754/2017/E-GOVERNANCE

**JITENDRA ARORA**

Director

Tel. : 011-23062317

E-mail : dir.ehealth@gmail.com



सत्यमेव जयते

भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
डी-307, निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare  
307-D, Nirman Bhavan, New Delhi-11001

Z-18015/1/2016-eGov

Dated: 24<sup>th</sup> June, 2016

To,

Mr. Sanjeev Kumar  
Executive Director  
National Health Systems Resource Centre  
New Delhi

**Subject:** Extension of engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

**Ref:** NHSRC Letter No NHSRC/15-16/HMIS/07 dated 10<sup>th</sup> June, 2016

Sir,

This is regarding extension of engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

2. It is informed that MoHFW has agreed to extend the engagement of NHSRC, New Delhi for two months i.e. till 5<sup>th</sup> August, 2016 for the aforementioned work.
3. This issues with the approval of the competent authority.

Yours Sincerely,

*(Signature)*  
(Jitendra Arora)

---

**Healthy Village, Healthy Nation**

**Sunil Sharma, IRPS**  
Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

D.O.No.Z-18015/1/2016-eGov  
Dated 19<sup>th</sup> July, 2016

Dear Colleague,

This is in reference to National Identification Number to Health Facilities of India (NIN to HFI) implementation (Letter No Z-18015/1/2016-eGov; dated 3<sup>rd</sup> Feb 2016).

2. I would like to appreciate the active steps being actively taken by your State/ UTs for verification of health facilities in NIN Portal (<http://nin.nhp.gov.in>). As another step forward, the Centre for Health Informatics (CHI) has mapped MCTS facility master (used as basis for NIN database) with HMIS Facility Master for all States/UTs. This mapping has been conducted in order to identify common health facilities in both Master Facility databases; identify and include health facilities which are currently not part of NIN database and identify & mark duplicates/ non-functional facilities. The mapping will help standardize HMIS and MCTS Facility masters in line with NIN Database.

3. HMIS & MCTS Facility Master mapping sheets have been shared (in excel workbook) with Nodal Officers assigned for respective States/ UTs. It may be noted that:

- health facilities which are found common in both the masters are marked as "Green";
- health facilities which are available in HMIS Facility Master but could not be mapped with MCTS Facility Master are marked as "Red" and
- Facilities which are available in MCTS Facility Master but could not be traced in the HMIS Facility Master are marked in "Blue" color.
- "Yellow" color marked facilities are those which are found duplicate in either of the Facility Masters and require to be corrected in the NIN Database.

4. You are requested to get all these facilities verified which have been marked in red, blue and yellow colors with the State's/UT's Nodal person and the concerned District Officer. The verification process should result in following-

- List of common facilities in both facility masters
- List of facilities which are currently not part of NIN Database but are available in HMIS facility master- *these to be entered into database of NIN Portal*
- List of facilities which are non functional/duplicate/wrong entries in both databases/ facility masters— *and if these are part of database of NIN Portal, they should be marked as non-functional/duplicate/wrong entry in NIN Portal.*

5. In addition, those public health facilities which are functional in the State/ UT but are not part of HMIS and MCTS facility masters should be separately entered into the NIN Portal. It is also requested that all registered private health facilities should be verified and entered into the NIN Portal. The facility registration form from NIN Portal should be used to enter these facilities.




**National Health Mission**

Receipt No : 487754/2017/E-GOVERNANCE

6. I would request you to please get this task completed on priority basis as it is targeted to complete the exercise by **8<sup>th</sup> August, 2016**. For further queries, Dr. Amit Mishra, Project Lead, NIN-to-HFI, CHI (M 9910011595, mail – amit.mishra@nhp.gov.in) can be contacted.

With regards,

Yours sincerely,

  
(Sunil Sharma)

To,

1) Principal Secretaries (Health) of State & UTs ✓

2) MD of NHM of State/UTs

RSI  
Pl. Issue



**Sunil Sharma, IRPS**

Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

D.O.No.Z-18015/1/2016-eGov

Dated 19<sup>th</sup> July, 2016

Dear Colleague,

This is in reference to National Identification Number to Health Facilities of India (NIN to HF) implementation (Letter No Z-18015/1/2016-eGov; dated 3<sup>rd</sup> Feb 2016).

2. I would like to appreciate the active steps being actively taken by your State/ UTs for verification of health facilities in NIN Portal (<http://nin.nhp.gov.in>). As another step forward, the Centre for Health Informatics (CHI) has mapped MCTS facility master (used as basis for NIN database) with HMIS Facility Master for all States/UTs. This mapping has been conducted in order to identify common health facilities in both Master Facility databases; identify and include health facilities which are currently not part of NIN database and identify & mark duplicates/ non-functional facilities. The mapping will help standardize HMIS and MCTS Facility masters in line with NIN Database.

3. HMIS & MCTS Facility Master mapping sheets have been shared (in excel workbook) with Nodal Officers assigned for respective States/ UTs. It may be noted that:

- health facilities which are found common in both the masters are marked as "Green";
- health facilities which are available in HMIS Facility Master but could not be mapped with MCTS Facility Master are marked as "Red" and
- Facilities which are available in MCTS Facility Master but could not be traced in the HMIS Facility Master are marked in "Blue" color.
- "Yellow" color marked facilities are those which are found duplicate in either of the Facility Masters and require to be corrected in the NIN Database.

4. You are requested to get all these facilities verified which have been marked in red, blue and yellow colors with the State's/UT's Nodal person and the concerned District Officer. The verification process should result in following-

- List of common facilities in both facility masters
- List of facilities which are currently not part of NIN Database but are available in HMIS facility master- *these to be entered into database of NIN Portal*
- List of facilities which are non functional/duplicate/wrong entries in both databases/ facility masters--- *and if these are part of database of NIN Portal, they should be marked as non-functional/duplicate/wrong entry in NIN Portal.*

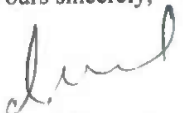
5. In addition, those public health facilities which are functional in the State/ UT but are not part of HMIS and MCTS facility masters should be separately entered into the NIN Portal. It is also requested that all registered private health facilities should be verified and entered into the NIN Portal. The facility registration form from NIN Portal should be used to enter these facilities.

AL HEALTH

o/c

ou to please get this task completed on priority basis as it is targeted to complete  
st, 2016. For further queries, Dr. Amit Mishra, Project Lead, NIN-to-HFI, CHI (M  
mishra@nhp.gov.in) can be contacted.

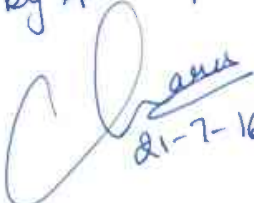
Yours sincerely,

  
(Sunil Sharma)

To,

1) P.S.(H) of ~~State~~ (Health) of State & UTs

✓ 2) MD of NHM of State/UTs

Please Issue R&I  
by speed post  
21-7-16

**Sunil Sharma, IRPS**  
Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

D.O.No.Z-18015/1/2016-eGov  
Dated 19<sup>th</sup> July, 2016

Dear Colleague,

This is in reference to National Identification Number to Health Facilities of India (NIN to HFI) implementation (Letter No Z-18015/1/2016-eGov; dated 3<sup>rd</sup> Feb 2016).

2. I would like to appreciate the active steps being actively taken by your State/ UTs for verification of health facilities in NIN Portal (<http://nin.nhp.gov.in>). As another step forward, the Centre for Health Informatics (CHI) has mapped MCTS facility master (used as basis for NIN database) with HMIS Facility Master for all States/UTs. This mapping has been conducted in order to identify common health facilities in both Master Facility databases; identify and include health facilities which are currently not part of NIN database and identify & mark duplicates/ non-functional facilities. The mapping will help standardize HMIS and MCTS Facility masters in line with NIN Database.
3. HMIS & MCTS Facility Master mapping sheets have been shared (in excel workbook) with Nodal Officers assigned for respective States/ UTs. It may be noted that:
  - health facilities which are found common in both the masters are marked as "Green";
  - health facilities which are available in HMIS Facility Master but could not be mapped with MCTS Facility Master are marked as "Red" and
  - Facilities which are available in MCTS Facility Master but could not be traced in the HMIS Facility Master are marked in "Blue" color.
  - "Yellow" color marked facilities are those which are found duplicate in either of the Facility Masters and require to be corrected in the NIN Database.
4. You are requested to get all these facilities verified which have been marked in red, blue and yellow colors with the State's/UT's Nodal person and the concerned District Officer. The verification process should result in following-
  - List of common facilities in both facility masters
  - List of facilities which are currently not part of NIN Database but are available in HMIS facility master- *these to be entered into database of NIN Portal*
  - List of facilities which are non functional/duplicate/wrong entries in both databases/ facility masters--- *and if these are part of database of NIN Portal, they should be marked as non-functional/duplicate/wrong entry in NIN Portal.*
5. In addition, those public health facilities which are functional in the State/ UT but are not part of HMIS and MCTS facility masters should be separately entered into the NIN Portal. It is also requested that all registered private health facilities should be verified and entered into the NIN Portal. The facility registration form from NIN Portal should be used to enter these facilities.

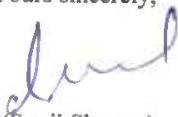


**National Health Mission**

6. I would request you to please get this task completed on priority basis as it is targeted to complete the exercise by **8<sup>th</sup> August, 2016**. For further queries, Dr. Amit Mishra, Project Lead, NIN-to-HFI, CHI (M 9910011595, mail – amit.mishra@nhp.gov.in) can be contacted.

With regards,

Yours sincerely,

  
(Sunil Sharma)

To,

- 1) Principal Secretaries (Health) of State & UTs
- 2) MD of NHM of State/UTs



Receipt No : 487754/2017/E-GOVERNANCE



सुजाता सौनिक  
प्रधान सचिव  
**Sujata Saunik**  
Principal Secretary



महाराष्ट्र शासन  
सार्वजनिक आरोग्य विभाग  
मंत्रालय

कॉम्प्लेक्स बिल्डिंग, गोकुलदास तेजपाल रुग्णालय कंपाउंड,  
१०वां मजला, मुंबई ४०० ००१  
दुरध्वनी : कार्यालय - ०२२-२२६१७३८८ फॅक्स : २२६१७९९९  
ई-मेल : psec.pubhealth@maharashtra.gov.in  
pspubhealth@gmail.com

GOVERNMENT OF MAHARASHTRA  
Public Health Department  
Mantralaya

Complex Building, Gokuldas Tejpal Hospital Compound,  
10th Floor, Mumbai - 400 001.  
Phone : 022-22617388 Fax : 022-22617999  
Email: psec.pubhealth@maharashtra.gov.in  
pspubhealth@gmail.com

No. EGV- 2016/CR07/e-gov  
Date: 4<sup>th</sup> June 2016

To,

The Addl. Secretary and Mission Director (NHM)  
Ministry of Health and Family Welfare,  
Government of India,  
Nirman Bhavan, New Delhi 110 108.

**Sub: Status of National Identification Number (NIN) – Maharashtra..**

**Ref:** Interim status update of NIN Implementation via email dated 5<sup>th</sup> May 2016

Dear Sir,

With reference to the above, please be informed that Public Health Department, Govt. of Maharashtra has completed 100% validation and verification work of NIN for the Maharashtra state.

All the health facilities now have the unique 10 digit number to achieve inter-operability between different IT applications at the center and across the states. The complete details of all the Health Facilities of Maharashtra state is available on the portal <http://nin.nhp.gov.in/>.

Thanking you,

(Sujata Saunik)  
Principal Secretary,  
Public Health Department  
Maharashtra, Mumbai.

Dr. P. C. Mohan

✓ Copy FWCs to Shri Jitendra Arora, Director (e-Health), Ministry of Health and Family Welfare, Government of India, New Delhi for favour of information.

Mo (e Gov)  
copy



जनन व मृत्युची नोंदणी करा.  
REGISTER ALL BIRTHS AND DEATHS

Receipt No : 487754/2017/E-GOVERNANCE

2-18015/1/2016-eGov

Government of India

Ministry of Health &amp; Family Welfare

Nirman Bhawan, New Delhi

Dated the 4<sup>th</sup> July, 2016

The Director,  
Prof. A. K. Ahangar  
NEIGRIHMS  
Mawdiangdiang,  
Shillong-793018  
Meghalaya

Subject: Approval of funds for NIN workshop at NEIGRIHMS, Meghalaya.

Sir,

In reference to the NIN-to-HFI verification process, the Ministry of Health and Family Welfare (MoHFW) has initiated a process where in all the health facilities in India will be assigned a National Identification Number (NIN) for geographical location identification. The North Eastern States are facing some difficulties during the verification process on NIN portal.

2. In view of this, a technical training cum workshop session on NIN verification process is proposed to be organized at NEIGRIHMS, Shillong. NIN Nodal officers from 8 North Eastern States (Assam, Arunachal Pradesh, Meghalaya, Manipur, Mizoram, Sikkim, Tripura and Nagaland) will be invited for the workshop. A team from Centre for Health Informatics will be taking the workshop.

3. NIEGRIHMS, Shillong is requested to kindly provide the necessary support such as Boarding, Lodging, reimbursing the Air fare and Taxi fare for Nodal Officers of North Eastern States etc. The expenditure on conducting the workshop successfully, may be booked under the Grant in Aid (GIA) released to NEIGRIHMS Shillong by "Telemedicine Division", MoHFW.

Yours Faithfully,

(Jitendra Arora)

Director (eGov)

MoHFW

011-23062317

Copy to:

- i. Shri Ankit Tripathi, Additional Director, CHI, NIHFW
- ii. Dr. Prithwis Bhattacharya, Nodal Officer for Telemedicine and incharge at NEIGRIHMS, Meghalaya.

Please issue LR I  
by speed post

Chandra  
5-7-16

**CENTRE FOR HEALTH INFORMATICS (CHI)**  
**NATIONAL INSTITUTE OF HEALTH AND FAMILY WELFARE (NIHFW)**

● No.:NIHFW/CHI/NIN/Trg./2016

To,

Date: 20<sup>th</sup> June 2016

Sh. Jitendra Arora  
Director (eGov)  
Ministry of Health and Family Welfare  
Department of Health and Family Welfare  
Nirman Bhawan, New Delhi

**Sub: Request for approval of funds for NIN Workshop at NEIGRIHMS, Meghalaya**

Dear Sir,

This in reference to the NIN-to-HFI verification process, the Ministry of Health & Family Welfare (MoHFW) has initiated a process where in all the health facilities in India will be assigned a National Identification Number (NIN) for geographical location identification. The North Eastern States are facing some difficulties during the verification process on NIN Portal. The state nodal officer has requested us to conduct a technical training cum workshop session.

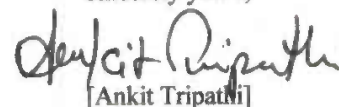
In the above view, it is proposed to conduct one day training at NEIGRIHMS, Meghalaya on NIN verification process. Following persons from CHI, NIHFW will be traveling to NEIGRIHMS to give the training:-

S.No	Name	Designation
1	Sh. Ankit Tripathi	Additional Director, Centre for Health Informatics
2	Mr. Saurabh Kumar	Associate Consultant, Centre for Health Informatics
3	Mr. Vineet Chawla	Software Developer, NICISI, Centre for Health Informatics

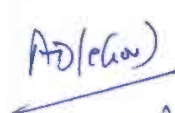
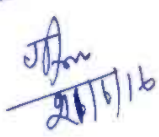
We plan to invite NIN Nodal officers from 8 North Eastern states (Assam, Arunachal Pradesh, Meghalaya, Manipur, Mizoram, Manipur, Tripura and Nagaland) for the workshop. As per the discussion held with Dr. Prithwis Bhattacharya, Nodal Officer of Telemedicine for North East and in charge at NEIGRIHMS, Meghalaya, they require approval of financial expenditure and sanction of amount mentioned in the attached Annexure – 1.

Submitted for kind approval, please.

Thanking you,  
Sincerely yours,

  
[Ankit Tripathi]

Additional Director, Centre for Health Informatics  
National Institute of Health and Family Welfare,  
Munirka, New Delhi 110067  
Mobile: 7838363525

  
  
20/6/16

**Annexure – 1**

Sl.no	Particular/Items	Avg. Rate	No. of persons	Total Amount (Rs)
1	Air Fare ( 2 ways)	Rs. 12,000.00	15	Rs. 1,80,000.00
2	Taxi Fare (2 persons per taxi for up & down journey)	Rs. 5,000.00	10	Rs. 50,000.00
3	Single room for two days	Rs. 7,000.00	15	Rs. 1,05,000.00
4	Food	Rs. 500.00	25	Rs. 12,500.00
5	Drinking Water (1ltr)	Rs. 20.00	25	Rs. 500.00
6	Tea / coffee + snacks	-	-	Rs. 2,000.00
7	Pens & Notepad	-	-	Rs. 500.00
8	Miscellaneous	-	-	Rs. 5000.00

**Grand Total Amount = Rs. 3,55,500 /-**

- The amount needs to be credited in advance to bank account of NEIGRIHMS, Meghalaya so that they are able to reimburse the TA /DA, lodging, taxi and make other arrangements.

Receipt No : 487754/2017/E-GOVERNANCE

**JITENDRA ARORA**

Director

Tel. : 011-23062317

E-mail : dir.ehealth@gmail.com



सत्यमेव जयते

भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
डी-307, निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare  
307-D, Nirman Bhavan, New Delhi-11001

Z-18015/1/2016-eGov  
Dated: 24<sup>th</sup> June, 2016

To,

Mr. Sanjeev Kumar  
Executive Director  
National Health Systems Resource Centre  
New Delhi - 67

Subject: Extension of engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

Ref: NHSRC Letter No NHSRC/15-16/HMIS/07 dated 10<sup>th</sup> June, 2016

Sir,

This is regarding extension of engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

2. It is informed that MoHFW has agreed to extend the engagement of NHSRC, New Delhi for two months i.e. till 5<sup>th</sup> August, 2016 for the aforementioned work.
3. This issues with the approval of the competent authority.

please issue RFI  
by speed post  
Chauhan  
28-6-16

Yours Sincerely,

(Jitendra Arora)

Healthy Village, Healthy Nation







Dr. Sanjiv Kumar  
Executive Director  
(T) : 011 - 26108982  
Email: sanjiv.kumar@nhsrccindia.org



**National Health Systems Resource Centre**  
Technical Support Institution with  
National Health Mission  
Ministry of Health and Family Welfare,  
Government of India

File No. NHSRC/15-16/HMIS/07  
10/June/2016

Subject: Status update and request for extension on "Facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India" assignment

Dear Shri Jitendra Arora,

Greetings from NHSRC!

NHSRC has started working on the integration of facility master data of HMIS and MCTS system on 5<sup>th</sup> April 2016 for two months period. As on 5<sup>th</sup> June 2016, NHSRC has completed HMIS-MCTS Facility Master mapping exercise for 21 states. This mapping output is also being shared with the states for verification. For other seven states work is in progress. In remaining eight states mapping and district-wise rearranging of data is yet to be done. The activity-wise status and the challenges are mentioned in the annex-1.

Based on the meeting held in MoHFW with JS (eHealth) on 27<sup>th</sup> May 2016 and subsequent discussions with CHI-NIN team (2<sup>nd</sup> June 2016) following tasks related to NIN are required to be completed on priority.

1. Complete HMIS and MCTS mapping and district wise rearranging of data for remaining 15 states.
2. Support NIN data validation- Since states have initiated the data verification in NIN portal it is important that they verify NIN data along with the HMIS MCTS mapping to rule out inconsistencies. Follow up with the states for the verification and validation of NIN database is required.  
Timeline: 45 Days (Activity one and two would be done simultaneously)
3. Develop standards for NIN- NIN system can not function without standards. Architecture along with standards- (nomenclature, code directory and attributes) needs to be developed with stakeholder's consultation.  
Timeline: 15 Days

To complete tasks mentioned above, an extension of two months for this assignment is requested. For any queries you may please keep in touch with Dr. Amit Mishra, Senior Consultant-HMIS (email- [dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com) M-9910011595)

*Sanjiv Kumar*  
Dr. Sanjiv Kumar

To: Shri Jitendra Arora, Director, MoHFW, New Delhi

## Annex-1

## Activity-wise status on HMIS-MCTS Facility Master Mapping Exercise

Activity	Status	Remarks
1. Facility master mapping- a) Mapping of HMIS and MCTS facility masters with NIN. b) Identifying mismatches and duplicates and suggest standard process of verification. c) Provide list of all facilities of MCTS (including NIN) along with the attributes of HMIS where they map..	<p>The mapping activity completed for 21 states.</p> <p>Mapping Process: Mapping was done in excel sheet where combination of methods were used- Manual, Fuzzy Logic and Match Index function. In first step both HMIS and MCTS databases were mapped using three attributes for each state from both facility masters i.e. Facility Name, Type and ID (NIN in case of MCTS and HMIS ID incase of HMIS). Facilities which could not be mapped using this method were mapped for all remaining attributes manually. The overall output is a single excel sheet divided in four colors-</p> <p>Green- Facilities completely mapping with each other in both masters.</p> <p>Blue- HMIS Facilities which are not available in MCTS</p> <p>Red- MCTS Facilities which are not available in HMIS</p> <p>Yellow- Duplicate Facilities in both HMIS and MCTS</p> <p>The mapping output is re-organized district-wise to help states for verification.</p>	<p>NHSRC team started working on the assignment on 5th of April but later it was realized during the meeting (held in MoHFW on 20th April 2016) that additional information on HMIS database was required; and was received on 25th April 2016. This has led to rework and loss of 20 days of work. In addition since states have started verification in NIN portal the data was required to be placed district-wise to assist in verification.</p> <p>As of now Mapping and rearranging of seven states is work in progress and expected to be completed in 10-12 days. Remaining eight states would take around 25-30 days of time for completion.</p>
2. Develop standard definitions for attributes and suggest roadmap for NIN database updation	Developed conceptual architecture for the NIN system development and deployment. Presentation made to JS on 27 <sup>th</sup> May 2016.	Consultation- in-house and with stakeholders is required for standards finalization

Receipt No : 487754/2017/E-GOVERNANCE

State-wise Status of HMIS and MCTS Facility Master Mapping						
S.No.	State Name	Total Facilities	Confirmed Count	Verified Count by State Nodal	Method used for mapping	Final status
1	Andman & Nicobar	165	0	0	Manual	Completed
2	Dadra & Nagar Haveli	92	0	0	Manual	Completed
3	Himachal Pradesh	2987	0	0	Match + Index Function	Completed
4	Meghalaya	785	0	0	Manual	Completed
5	Mizoram	542	0	0	Manual	Completed
6	Daman & Diu	34	34	0	Manual	Completed
7	Chandigarh	70	64	64	Manual	Completed
8	Manipur	523	87	0	Manual	Completed
9	Puducherry	134	129	129	Manual	Completed
10	Sikkim	234	142	58	Manual	Completed
11	Goa	245	242	232	Manual	Completed
12	Punjab	3878	318	254	Match + Index Function	Completed
13	Haryana	3863	2194	2026	Match + Index Function	Completed
14	Jharkhand	4781	3341	351	Match + Index Function	Completed
15	Gujarat	9687	4785	0	Fuzzy Logic script	Completed
16	Chhattisgarh	6513	6306	5684	Manual	Completed
17	West Bengal	11660	6956	6	Match + Index Function	Completed
18	Odisha	8604	8470	8469	Fuzzy Logic script	Completed
19	Tamil Nadu	13046	11170	11169	Match + Index Function	Completed
20	Karnataka	13529	12676	11256	Fuzzy Logic script	Completed
21	Bihar	12936	12856	12747	Fuzzy Logic script	Completed
22	Arunachal Pradesh	806	0	0	Manual	Work In Progress
23	Kerala	7052	921	0	Match + Index Function	Work In Progress
24	Andhra Pradesh	9632	6416	0	Match + Index Function	Work In Progress
25	Madhya Pradesh	10817	9616	1414	Match + Index Function	Work In Progress
26	Assam	6699	0	0	Match + Index Function	Work In Progress
27	Delhi	3031	0	0	Manual	Work In Progress
28	Maharashtra	13984	13661	13379	Match + Index Function	Work In Progress
29	Lakshadweep	25	0	0	Fuzzy Logic script	Yet to be done
30	Telangana	5966	0	0	Match + Index Function	Yet to be done
31	Nagaland	786	3	0	Fuzzy Logic script	Yet to be done
32	Tripura	1149	240	0	Fuzzy Logic script	Yet to be done
33	Uttarakhand	2480	281	0	Manual	Yet to be done
34	Uttar Pradesh	28608	2663	0		Yet to be done
35	Rajasthan	19287	14613	14606	Match + Index Function	Yet to be done
36	Jammu & Kashmir	3512	805	0	Match + Index Function	Yet to be done





Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**Proposal to achieve convergence between 10 digit NIN database and 13 digit unique hospital ID of ROHINI database in order to achieve inter-operability**

1 message

Thu, Jun 23, 2016 at 6:54 PM

Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

To: ceo@iib.gov.in, ypriyab@iib.gov.in

Cc: S Swaminathan &lt;swami@gs1india.org&gt;, ANKIT TRIPATHI &lt;ankit\_tripathi11@hotmail.com&gt;, Sunil Sharma JS &lt;sunil.sharma62@gov.in&gt;, Amit Kumar &lt;amitkumariss34@gmail.com&gt;, Saurabh Kumar &lt;saubkr@gmail.com&gt;, reddy.ksj@iib.gov.in

Madam,

I would like to inform you that Ministry of Health & FW (MoHFW) has initiated a process to assign a 10 digit National Identification Number for all Health Facilities of India (NIN-2-HFI). Attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) have been mapped in NIN database.

2. At the same time, IIB in collaboration with GS1 India (promoted by Ministry of Commerce) is also assigning a 13 digit globally unique ID (GLN number) through ROHINI to private hospitals covered under IRDA.

3. To discuss the convergence between these two initiatives, a meeting was earlier held on 13.01.2016 with Sh. R. Raghawan, CEO, IIB in MoHFW. The two applications were discussed in detail and it is felt that two systems are required to be interlinked in order to achieve uniformity and inter-operability and to avoid two sets of number to Private Health Care Facilities.

4. In this regard, it is suggested that MoHFW would upgrade existing 10 digit NIN number allotted to all government health facilities to new 13 digit series by prefixing '290'. At the same time, MoHFW shall adopt 13 digit unique GLN numbers being allocated for private health facilities by IIB as National Identification Number based on GS1 Standards into its various applications where applicable. NIN portal will redirect all private health facilities to GS1 India web page for obtaining unique ID.

5. To achieve the above objective, an application will be created by Centre of Health Informatics (CHI) wherein the list of all Private Health facilities allotted with GS1 global unique ID and list of all Government Health Facilities allotted with NIN number can be interchanged and made accessible across the two portals through sharing of web services for information exchange. In this way two applications would be interlinked in order to achieve inter-operability and thus allocating two sets of numbers to private Health facilities will be also avoided.

6. IIB India is further requested to share the database of Private Health Facilities created in ROHINI with MoHFW. A meeting between officials of MoHFW & IIB may be facilitated at Hyderabad for seamless integration between ROHINI and CHI application. A copy of signed letter is enclosed.


Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

Copy to:

- i. Sh. Ankit Tripathi, Additional Director, Centre for Health Informatics, NIHFW.
- ii. Sh. S. Swaminathan, GS1, 330, 2nd Floor, 'C' Wing, August Kranti Bhawan, Bhikaji Cama Place, New Delhi - 110066.

---

 LETTER DATED 23.06.2016 TO IIB.pdf  
602K

**JITENDRA ARORA**

Director

Tel. : 011-23062317

E-mail : dir.ehealth@gmail.com



सत्यमेव जयते

By Speed Post

भारत सरकार

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

डी-307, निर्माण भवन, नई दिल्ली - 110011

Government of India

Ministry of Health &amp; Family Welfare

307-D, Nirman Bhavan, New Delhi-110011

No. Z-18015/1/2016-eGov

Date: 23<sup>rd</sup> June, 2016**Smt. Yegna Priya Bharat,**

Acting CEO,

Insurance Information Bureau of India,

Plot No.38/39, 1<sup>st</sup> Floor, APSFC Building,

Above Institute of Insurance And Risk Management (IIRM)

Financial District, Nanakramguda, Gachibowli,

Hyderabad (AP) - 500032

**Sub: Proposal to achieve convergence between 10 digit NIN database and 13 digit unique hospital ID of ROHINI database in order to achieve inter-operability**

Dear Madam,

I would like to inform you that Ministry of Health & FW (MoHFW) has initiated a process to assign a 10 digit National Identification Number for all Health Facilities of India (NIN-2-HFI). Attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) have been mapped in NIN database.

2. At the same time, IIB in collaboration with GS1 India (promoted by Ministry of Commerce) is also assigning a 13 digit globally unique ID (GLN number) through ROHINI to private hospitals covered under IRDA.

3. To discuss the convergence between these two initiatives, a meeting was earlier held on 13.01.2016 with Sh. R. Raghawan, CEO, IIB in MoHFW. The two applications were discussed in detail and it is felt that two systems are required to be interlinked in order to achieve uniformity and inter-operability and to avoid two sets of number to Private Health Care Facilities.

4. In this regard, it is suggested that MoHFW would upgrade existing 10 digit NIN number allotted to all government health facilities to new 13 digit series by prefixing '290'. At the same time, MoHFW shall adopt 13 digit unique GLN numbers being allocated for private health facilities by IIB as National Identification Number based on GS1 Standards into its various applications where applicable. NIN portal will redirect all private health facilities to GS1 India web page for obtaining unique ID.

---

**Healthy Village, Healthy Nation**



5. To achieve the above objective, an application will be created by Centre of Health Informatics (CHI) wherein the list of all Private Health facilities allotted with GS1 global unique ID and list of all Government Health Facilities allotted with NIN number can be interchanged and made accessible across the two portals through sharing of web services for information exchange. In this way two applications would be interlinked in order to achieve inter-operability and thus allocating two sets of numbers to private Health facilities will be also avoided.

6. IIB India is further requested to share the database of Private Health Facilities created in ROHINI with MoHFW. A meeting between officials of MoHFW & IIB may be facilitated at Hyderabad for seamless integration between ROHINI and CHI application.

Regards,

*Jitendra Arora*

(Jitendra Arora)  
Director (eGov)

O/C

Copy to:

- i. Sh. Ankit Tripathi, Additional Director, Centre for Health Informatics, NIHFW.
- ii. Sh. Swaminathan, GS1, 330, 2nd Floor, 'C' Wing, August Kranti Bhawan, Bhikaji Cama Place, New Delhi - 110066.



Issue by Speed Post

*[Signature]*

## NIN Verification Status - 21 st June' 2016

S.No.	State Name	Total Health Facilities	Confirmed Count by District officer	Verified Count by State Nodal officer
1	Andhra Pradesh	9640	6462	0
2	Andman & Nicobar Islands	165	0	0
3	Arunachal Pradesh	806	0	0
4	Assam	6699	0	0
5	Bihar	12936	12861	12856
6	Chandigarh	70	64	64
7	Chhattisgarh	6513	6306	5684
8	Dadra & Nagar Haveli	92	92	9
9	Daman & Diu	34	34	34
10	Delhi	3031	0	0
11	Goa	245	242	242
12	Gujarat	10169	6351	0
13	Haryana	3863	2194	2026
14	Himachal Pradesh	2987	0	0
15	Jammu & Kashmir	3567	1103	0
16	Jharkhand	4789	3949	434
17	Karnataka	13529	13445	13445
18	Kerala	7063	1963	0
19	Lakshadweep	25	0	0
20	Madhya Pradesh	10817	9705	1424
21	Maharashtra	13984	13705	13491
22	Manipur	523	155	0
23	Meghalaya	785	0	0
24	Mizoram	542	0	0
25	Nagaland	786	3	0
26	Odisha	8604	8470	8469
27	Puducherry	135	135	135
28	Punjab	3878	292	285
29	Rajasthan	19314	14894	14673
30	Sikkim	234	142	92
31	Tamil Nadu	13047	11171	11169
32	Telangana	5990	4990	0
33	Tripura	1149	373	0
34	Uttar Pradesh	28789	18313	10558
35	Uttarakhand	2488	484	0
36	West Bengal	11660	6956	6
Total		208948	144854	95096

Receipt No : 487754/2017/E-GOVERNANCE

## NIN - NODAL OFFICERS

21-06-2016

S.No.	State	Name	Designation	Contact Number	Email ID
1	Chattisgarh	Sh. C.C. Santosh	Program Manager HMIS SPMU, NRHM, Raipur, Chhattisgarh	0771-2511301 9425513063	hmiscg@gmail.com
2	Chandigarh	Sh. Pankaj Rahl	Manager I.T. Cum HMIS/M&E	9501800303	nrhmchd@gmail.com
3	Haryana	Sh. Karan Khurana	MCTS State HQ, Haryana	8558894141	mo-mcts.nhm-hry@hry.gov.
4	Karnataka	Smt. B. Vinutha Rani	Demographer, Health and Family Welfare Services. Anand Rao Circle,	9449843357	demohealthkar@gmail.com
5	Madhya Pradesh	Mr. Neeraj Shrivastava	Consultant - HMIS/MCTS, National Health Mission, MP	9425303229	sdoneeraj@gmail.com
6	Maharashtra	Dr. Patil	Superintendent Engineer	9422153214	idw.mumbai@gmail.com
7	Nagaland	Dr. Khriezotuo Paphino	Dy. Director - I	9436001691	nrhmnagaland@gmail.com
8	Odisha	Sh. Sanjib Kumar Sutar	State Data Manager, Mission Directorate, National Health Mission, Odisha Agency Building, STUFW, Unit	9439994836	sdo1nrhm@gmail.com
9	Puducherry	Dr. J. Allirani K. Oudhayasourian 09443142111	Deputy Director (FW&MCH) Puducherry	9443960200	ddfwmchpdy@gmail.com
10	Punjab	Sh. Satinderpal Singh Chahal	Consultant - Health Informatics State Health Systems Resource Center National Health Mission, Punjab	8872090037	chinhmpb@gmail.com
11	Rajasthan	Ms. Shakuntala Choudhary	State Demographer & Evaluation	0172-4012025; 88720-90037	shakku15july@gmail.com
12	Tamil Nadu	Mr.R.Palanivelan	Assistant Director(Statistics) State Health Society, National Health Mission Tamil Nadu. Chennai - 600 006	9489048907	srhm.tn@nic.in, shsmtn@gmail.com
13	Meghalaya	Mr. Mac G L Nongpiur	State MCTS Co-Ordinator NRHM, Meghalaya	9436105419	sdmpromis.megh@gmail.com
14	Goa	Dr.Vandana Dhume Mr. Satyajeet - 9850192295	Chief Medical Officer, State Family Welfare Bureau, Directorate of Health	9011025029; 0832-2225976	sfwbgoa@hotmail.com
15	Uttarakhand	Dr. Nidhi Rawat	Uttarakhand Health & Family Welfare Society(Room No 22), Ground Floor Central Building. Directorate of Medical Health & Family Welfare.	9412046866	nidhirawatnegi@gmail.com
16	Kerala	Sh. G.Sunil kumar	State Programme Manager, National Health Mission, Kerala	8943777106	spmnrhm2015@gmail.com
17	Daman & Diu	Dr. Trushar Parmar	State Program Manager (NHM), State Health Society, UT of Daman & Diu	7574858468	dpodaman@gmail.com randir71@gmail.com
18	West Bengal	Ms. Sanghamitra Ghosh	State Statistical Manager National Rural Health Mission Health & Family Welfare	033-23330336 09231846477	sanghamitrighosh@yahoo.co
19	Dadra & Nagar Haveli	Mr. Kirat Parmar	State Data Manager	0260-2642940 9904068745	nrhmdns@gmail.com kiritpar@gmail.com svbch.sil@gmail.com cmodns@gmail.com

Receipt No : 487754/2017/E-GOVERNANCE

S.No.	State	Name	Designation	Contact Number	Email ID
20	Jammu & Kashmir	Mr. Athar Ali Mir	State Programme Manager M & E, (UNICEF/MCTC/IT)	8491998021	spmnhmjk@gmail.com
21	Gujarat	Dr. Prakash Vaghela	Deputy Director (Rural Health)	9978909989 9099075166	dmrignuj@gmail.com; dydir-rural- health@gujarat.gov.in , dydir.health.rh1@gmail.co
22	Himachal Pradesh	Shri. Divender Sen	Consultant MIS, National He	9418471840	misnrhmhp@gmail.com
23	Mizoram	Dr. R.Lalchhuanawma	State Nodal officer, ME	9436372429 9862787705	chuchunoma@gmail.com
24	Delhi	Smt. Jaishree Dash	MIS Expert, Delhi State Health Mission	011-23812904 8800307990	dshmhmis@gmail.com
25	Telangana	Shri S. Gopikanth Reddy	Chief Information Officer , FAC, NHM, Telangana	7893824242	clonhmts@gmail.com
26	Sikkim	Dr. Anita Bhutia	Deputy Director/NHM , Sikki	0359-205439, 9800783486	missikkim123@gmail.com
27	Manipur	Dr Probin Arambam	MBBS, MPH, Deputy Director(MD), Directorate of Medical & Health Services, Manipur Lamphelat Imphal-	96122 60649	parambam@gmail.com
28	Maharashtra	Shri Sanjay Patil	Superintendent Engineer, IDW, NHM, Public Health Deptt., Govt of	022-22717539 9422153214	ldw.mumbai@gmail.com
29	Andhara Pradesh	Shri. V. Aswini Dutt	Administrative Officer, NHM	9100939712	aonrhm@gmail.com
30	Tripura	Mr. Tapas Saha	Manager - MIS, NHM, Tripur	0381-2310453	shws_tripura@yahoo.co.in, hmis.tripura@gmail.com
31	Arunachal Pradesh	Dr. Nabam Peter	Health Research Scientist Directorate of Medical Education, Government of Arunachal	9402475729	nabampeter@gmail.com
32	Bihar	Mr. Ranjan Kumar (Nodal Officer) Sh. Arvind Kumar System Analyst-cum-Data Officer, State Health Society, Bihar	SD-cum-System Administrator	9473197723 9470003015	statehealth_society@yahoo.c
33	Uttar Pradesh	S. B.K Jain	GM(QA) NHM UP	9415763843	gm.planning2012@gmail. com idnshn@gmail.com
34	Assam	Dr. P Ashok Babu, IAS	Mission Director, NHM Assam	0361-2340239	mdnrhmasm@gmail.com misnrhm.assam@gmail.c
35	Jharkhand	Dr. U.C. Sinha	Cell Incharge, Data Cell, NH	9431520758	sinha.uc@gmail.com; nrhmjharkhand3@gmail.c

Receipt No : 487754/2017/E-GOVERNANCE

**Sunil Sharma, IRPS**  
Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

No. Z-18015/1/2016-eGov

Dated: 27.04.16

Dear Colleague

As you may be aware, each health facility in India is to be assigned a unique number called National Identification Number (NIN). Assignment of this number is a prerequisite for creation of interoperable health records.

The Ministry of Health and Family Welfare has already assigned NIN to each health facility covered under MCTS. In this regard, all states have been advised to get the verification of all their health facilities with their attributes. As also emphasized vide DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016, this verification exercise is needed to be carried out on emergent basis.

However, review of the position reveals that in your states, out of total -- Health Facilities available, no verification has been made up till now on the portal, whereas the verification exercise was sought to be completed by March, 2016.

I may request you to personally monitor this activity and get the verification of all the health facilities in the state and at the district level completed by 10<sup>th</sup> of May, 2016, positively. (Sh. -- has been appointed as the nodal officer from your state for this work)

*With regards,*

Yours sincerely,

*(Signature)*  
(Sunil Sharma)

**Mission Directors of NHM:-**

(Chandigarh, Dadra & Nagar Haveli, Daman & Diu, Delhi, Gujarat, Haryana, Himachal Pradesh, Jammu & Kashmir, Karnataka, Kerala, Madhya Pradesh, Meghalaya, Mizoram, Nagaland, Orissa, Pondicherry, Punjab, Rajasthan, Sikkim, Tamil Nadu, Telengana, Uttarakhand)

*Please issue L25  
by speed post*

*Chauhan*  
*3-5-16*



**National Health Mission**



Receipt No : 487754/2017/E-GOVERNANCE

**Sunil Sharma, IRPS**

Joint Secretary



सत्यमेव जयते

स्पीड पोस्ट द्वारा  
BY SPEED POST

भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

No. Z-18015/1/2016-eGov

Dated: 27.04.16

Dear Colleague

As you may be aware, each health facility in India is to be assigned a unique number called National Identification Number (NIN). Assignment of this number is a primary requirement for creation of interoperable health records.

The Ministry of Health and Family Welfare has already assigned NIN to each health facility covered under MCTS. In this regard, all states have been advised to get the verification of all their health facilities and their attributes. As also emphasized in vide DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016, this verification exercise is needed to be carried out on emergent basis.

Review of the progress in the above matter has revealed that from your State even the nodal officer has not been appointed for the above activity. I may request you to appoint a nodal officer for undertaking above activity immediately and have the verification process completed in a time bound manner by 15<sup>th</sup> may, 2016.

*With regards,*

Yours sincerely,

(Sunil Sharma)

**Mission Directors of following States:-**

(Andhra Pradesh, Andaman & Nicobar Islands  
Arunachal Pradesh, Assam, Bihar, Jharkhand,  
Lakshadweep, Manipur, Tripura, Uttar Pradesh)

*Please Issue R&I  
by speed post*

*Chauhan*  
*3-5-16*

*o/c*

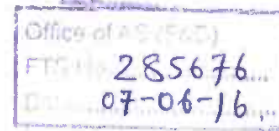
**National Health Mission**



**OFFICE OF THE MISSION DIRECTOR  
NATIONAL HEALTH MISSION, MEGHALAYA**

Directorate of Health Services, Red Hill, Upper New Colony, Health Complex,  
Laitumkhrach, Shillong-793003, Ph-0364-2506460/2506552, Fax: 0364-2506244

Email: nrhmmegh@gmail.com



No: DHS/MCH&FW/NHM/58/2016/ 2091

Dated: 9.5.2016

From **Jt. Mission Director, NHM**  
Meghalaya, Shillong

To,  
✓ **Shri. K.B. Agarwal**  
Additional Secretary, Government of India  
Ministry of Health & Family Welfare  
Nirman Bhawan,  
New Delhi - 110011

AD(ehw)  
din file

Subject: Regarding User ID for NIN to HFI.

Reference: D.O Letter No. Z - 18015/1/2016-e-Gov, dated 3<sup>rd</sup> February, 2016

JH

Sir,

With reference to the above mentioned subject, I would like to inform you that the State has tried to login to the NIN to HFI portal for verification of health facilities but out of the 12 User ID's provided by Ministry of Health and Family Welfare, GoI, only 3 User ID are Working. The User ID's of the 9 Districts which are not working are (a). West Jaintia Hills, (b). East Jaintia Hills, (c). East Khasi Hills, (d). West Khasi Hills, (e). South West Khasi Hills, (f). Ri Bhoi, (g). North Garo Hills, (h). South Garo Hills and (i). West Garo Hills.

This is for favour of your kind information.

Thanking you

Yours faithfully

**Jt. Mission Director, NHM**  
Meghalaya, Shillong

Dated

Memo No.DHS/MCH&FW/NHM/58/2016/

Copy to :-

1. The Mission Director, NHM, Meghalaya for information.
2. Shri. Ankit Tripathi, AD, Centre for Health Informatics, New Delhi for information.
3. Mr Saurabh Kumar, Associate Consultant, Centre for Health Informatics, New Delhi for information.

**Jt. Mission Director, NHM**  
Meghalaya, Shillong

Get every Newborn immunized

\*At birth: BCG, OPV (0 dose) || \*At 1 ½ months: DPT1, OPV1 || \*At 2 ½ months: DPT2, OPV2 || \*At 3 ½ months: DPT3, OPV3 || \*At 9 months: Measles  
Conduct delivery at Govt. Hospital & get Rs.700/- under Janani Suraksha Yojana || Healthy Family, Healthy Village, Healthy Nation

Receipt No : 487754/2017/E-GOVERNANCE



**Government of Puducherry**  
**Puducherry State Health Mission**  
**Victor Simonel Street, 2<sup>nd</sup> Floor,**  
**Old Maternity Hospital Complex,**  
**Puducherry – 605 001.**

Phone: 0413-2224039 & 2224059  
 email : nrhmpondicherry@yahoo.co.in

PSHM/SDO/2016-17/ 99

Date: 13.05.2016

To  
 Shri. Sunil Sharma, IRPS  
 Joint Secretary,  
 Government of India,  
 Ministry of Health & Family Welfare,  
 Nirman Bhava,  
 New Delhi – 110 108

Office of Joint Secretary (IRPS)  
 No. 272893  
 Date: 19/5/16

Dear Sir,

Sub. : Verification of all Health Facilities with their attributes in NIN Portal of  
 UT of Puducherry - Reg.,

Ref. : No.Z-18015/1/2016-eGov. Dated 28.04.16

As per the direction given by Ministry of Health and Family Welfare assigned NIN to each health facility covered under MCTS. In this regard, UT of Puducherry has been completed NIN to health facility in 3 districts out of 4 districts, rest of the 1 district will be completed very soon, but no verification has been made up till now on the portal.

In this regard, the Team NIN, National Co-ordination Unit, Centre for Health Informatics (CHI), National Institute of Health and Family Welfare, Munirka, New Delhi already shared District and State Credentials login with UT of Puducherry. But District Credentials login not working in the NIN portal from the date of sharing. Due to this reason we could not able to verify the Health Facilities with their attributes. This problem we have already (06.05.2016) shared with Mr. Saurabh Kumar, Associate Consultant, Centre for Health Informatics, New Delhi through e-mail. Still we are waiting for the reply.

Hence, we may request you after solving the problem of District Credential login we are ready to verify all the health facilities with their attributes in UT of Puducherry.

Thanking you

Yours faithfully,

(Dr. T. Kalimuthu)  
 Mission Director

Copy to :

1. Shri. Ankit Tripathi, AD, CHI, New Delhi. E-mail : ankt.tripathi@gov.in
2. Mr. Saurabh Kumar, Associate Consultant, CHI, New Delhi. e-mail : saurabh@nhp.gov.in

Receipt No : 487754/2017/E-GOVERNANCE

5/20/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)

Subject: **RE: Verification of all Health Facilities with their attributyes in NIN Portal of UT of Puducherry-reg.**

Date: 05/20/16 03:12 PM

From: Saurabh Kumar &lt;saurabh@nhp.gov.in&gt;

To: nrhmpondicherry@yahoo.co.in

Cc: ddfwmchpdy@gmail.com, sunil.sharma62@gov.in,

jitendra.arora@gov.in, ankit.tripathi@gov.in, at@nihfw.org

NIN.PDF (125kB)

Dear Dr. T. Kalimuthu,

Apologies for the delay and inconvenience caused. Our team has resolved the issue, the new login Credentials are mentioned below.

Sir, please let us know in case of any further issues.

S.No.	District	User ID	Password
1	Karaikal	District_karaikal	karaikal@123
2	Mahe	District_mahe	mahe@123
3	Puducherry	District_puducherry	puducherry@123
4	Yanam	District_yanam	yanam@123

S.No	Union Territories	User ID	Password
1	Puducherry	State_Puducherry	Puducherry&*123

Thanks & Regards,  
Saurabh Kumar  
Associate Consultant, CHI  
M: 9855226374

**From:** sunil.sharma62@gov.in [mailto:sunil.sharma62@gov.in]

**Sent:** Friday, May 20, 2016 10:32 AM

**To:** saurabh@nhp.gov.in

**Subject:** Verification of all Health Facilities with their attributyes in NIN Portal of UT of Puducherry-reg.

PFA.



गौरव सिंह राजावत, भा.प्र.से.

**Gaurav Singh Rajawat, I.A.S.****Mission Director (NRHM)**

समाहर्ता एवं जिलाधीश  
प्रशासन, दादरा एवं नगर हवेली,  
संघ शासित प्रदेश,  
सिलवासा-३९६ २३०.

**Collector & District Magistrate  
Administration of  
Dadra & Nagar Haveli, (UT)  
Silvassa - 396 230.**

DO No.SHS/NRHM/MCTS/2011/3330

Date: 18/05/2016.

Dear Sir,

27.57.19/16  
24/5/16

Please refer to you DO Letter No. Z-18015/1/2016-eGov dated 28.04.2016 regarding assigning a unique number called National Identification Number (NIN) for health facilities. In this context, I would like to inform you that for verification we require login credentials for the UT of D&NH for which we have requested to Shri Saurabh Kumar, Associate Consultant, CHI on 13.05.2016. As soon we get login credential we will complete verification.

This is for your information and necessary action please.

With regards.

Yours sincerely,

*(Signature)*  
(Gaurav Singh Rajawat)

**Shri Sunil Sharma, IRPS,**  
Joint Secretary,  
Government of India,  
Ministry of Health & Family Welfare,  
Nirman Bhawan,  
**New Delhi – 110 108.**

*(Signature)*  
24/5/16  
SW(e-for) / CHI (Shri Saurabh Kumar)  
At (e-for)

Receipt No : 487754/2017/E-GOVERNANCE

05/24/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)Subject: **NIN: Update & Request for Meeting**

To: sunil.sharma62@gov.in

Date: 05/24/16 10:30 AM

From: Amit Mishra &lt;dr.amitmishra@gmail.com&gt;

Cc: "Jitendra Arora, Dir. eHealth MoHFW" <dir.ehealth@gmail.com>,  
 Sunil Kumar <sunil.bhushan@gov.in>,  
 "Dr. Satish Kumar" <satish.kumar@nhsrcindia.org>,  
 Deepti Srivastava <deepti.srivastava@nic.in>,  
 Suparna <suparna@nic.in>,  
 ASFood and Drug MoHFW <asfnd.kb@gmail.com>,  
 priyanka yadav <pryadav@taurusglobal.com>,  
 Krishan Bhardwaj <krbhardwaj@taurusglobal.com>,  
 Dr Pankaj Gupta <dr Gupta.tgi@gmail.com>

27-6581/16  
 25/5/16

Dear Sir,

NHSRC was assigned with the task of mapping facility masters of HMIS and MCTS systems for development of NIN database. The assignment was given for a period of two months (from 5th April 2016 to 5th June 2016).

To give you an update, I would like to inform you that as of now (23rd May 2016), we have completed mapping of 24 states. Script-based mapping is also completed for another 9 states and manual mapping for these is in progress. Two states UP and Rajasthan are yet to be mapped.

We have also developed Architecture for NIN System (Facility Registry) based on the findings of mapping and the study of global experiences in this area.

In this regard, may I request to you for a meeting during this week as per your convenience, to give update on this assignment and discuss some of the critical issues related to NIN. The agenda of the meeting would be following:

1. To update on status of Facility Master Mapping
2. To discuss challenges with respect to the mapping
3. Discussion on NIN Architecture, development and implementation plan.
4. Integration with legacy systems, deployment and timelines etc.

Please let us know the suitable time and date for the meeting during this week.

Warm regards,  
 Dr. Amit Mishra

Sr. Consultant  
 National Health Systems Resource Centre,  
 NIHFWS Campus, Baba Ganganath Marg I Munirka, New Delhi-110067  
 Mobile: +91 9910011595 | Ph : 011 26108982,83,84, | Fax : 26108994.  
 E-mail: dr.amitmishra@gmail.com | Website : www.nhsrcindia.org

3.00 pm on 17/5/16

PPS / Dir(e-gov)  
 PL speak. May plan for 1/2 hour meeting  
 in my chamber on Thursday / Friday  
 24/5

AD(e-gov)  
 25/5

JS(e-gov) has desired that this meeting may be fixed at 3 pm on 27.5.2016 in his chamber. All concerned may be informed accordingly.

- G. Anil Kumar  
 P.S. to JS(e-gov)  
 26.5.2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)



e-office - 274861/16

**OFFICE OF THE MISSION DIRECTOR,  
NATIONAL HEALTH MISSION, ASSAM**

Saikia Commercial Complex, G. S. Road, Christianbasti, Guwahati - 781005

Web site : <http://www.nrhmassam.in> :: E\_mail ID : [misnrhm.assam@gmail.com](mailto:misnrhm.assam@gmail.com)

No.: NHM/NIN-to-HFI/2866/2015-16/ 1407

Dated: 17/05/2016

To,

Shri Sunil Sharma, IRPS  
Joint Secretary to the Government of India  
Ministry of Health & Family Welfare  
Nirman Bhawan, New Delhi - 110108

**Sub:** Nomination of Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

Ref :

1. Letter No: Z-18015/1/2016-eGov dated 28<sup>th</sup> April 2016
2. This office letter no: NHM/NIN-to-HFI/2866/2015-16/27711 dated 18<sup>th</sup> March 2016
3. Letter No Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016

Sir,

With reference to the subject cited above, I would like to inform you that, intimation regarding nomination of Nodal officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal was communicated to the National Coordinator, National Coordination Unit, Centre for Health Informatics (CHI), National Institute of Health and Family Welfare, New Delhi - 110067 vide this office letter no: NHM/NIN-to-HFI/2866/2015-16/27711 dated 18<sup>th</sup> March 2016. Copy of the letter enclosed. The nomination letter was also forwarded to email id [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) and [at@nihfw.org](mailto:at@nihfw.org) as communicated vide letter no: Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016 from Additional Secretary, Government of India, Ministry of Health & Family Welfare. The verification of health facilities could not be carried out for want of login information in the portal.

As communicated in the letter mentioned above, following officer is nominated as State Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal:

Dr. P. Ashok Babu, IAS  
Mission Director  
National Health Mission, Assam  
Saikia Commercial Complex  
G. S. Road, Christianbasti, Guwahati - 781005  
Phone No: +91-361-2340239  
Email ID: [mdnrhmasm@gmail.com](mailto:mdnrhmasm@gmail.com)

Further, District Programme Managers of all Districts of Assam have been nominated as District Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

It is requested to provide the login credential of NIN Portal to carry out the verification process.

Yours faithfully,

Enclosure: As stated above.

(Dr. P. Ashok Babu, IAS)

Mission Director  
National Health Mission, Assam

Page 1 of 2




Memo No: NHM/NIN-to-HFI/2866/2015-16/ 1408-13

Dated: 17/05/2016

Copy to:

- 1) PS to Additional Secretary, Ministry of Health & Family Welfare, Government of India, Nirman Bhawan, New Delhi – 110011.
- 2) PS to the Additional Chief Secretary to the Govt. of Assam, Health & Family Welfare Department.
- 3) The Commissioner & Secretary to the Govt. of Assam, Health & Family Welfare Department, for favour of kind information.
- 4) The Commissioner Health (J.B.), Govt. of Assam, for favour of information.
- ✓ 5) Shri Jitendra Arora, Director (eHealth), Ministry of Health & Family Welfare, Room No 307D, Nirman Bhawan, New Delhi – 110108, for favour of information.
- 6) The National Coordinator, National Coordination Unit, Centre for Health Informatics (CHI), National Institute of Health and Family Welfare, Baba Gang Nath Marg, Munirka, New Delhi – 110067, for information.

  
Mission Director  
National Health Mission, Assam





**OFFICE OF THE MISSION DIRECTOR,  
NATIONAL HEALTH MISSION, ASSAM**

Saikia Commercial Complex, G. S. Road, Christianbasti, Guwahati - 781005

Web site : <http://www.nrhmassam.in> :: E\_mail ID : [misnrhm.assam@gmail.com](mailto:misnrhm.assam@gmail.com)

No.: NHM/NIN-to-HFI/2866/2015-16/ ২৩৭ ১১

Dated: 18<sup>th</sup> March 2016

To,

The National Coordinator  
National Coordination Unit  
Centre for Health Informatics (CHI)  
National Institute of Health and Family Welfare  
Baba Gang Nath Marg, Munirka, New Delhi - 110067

Sub: Nomination of Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

Ref: Letter No Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016

Sir,

With reference to the subject cited above, I would like to inform you that, following officer is nominated as State Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal:

Dr. P. Ashok Babu, IAS  
Mission Director  
National Health Mission, Assam  
Saikia Commercial Complex  
G. S. Road, Christianbasti, Guwahati - 781005  
Phone No: +91-361-2340239  
Email ID: [mdnrhmasm@gmail.com](mailto:mdnrhmasm@gmail.com)

You are requested to provide the login credential of NIN Portal.

Further, District Programme Manager of all Districts of Assam has been nominated as District Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

Yours faithfully,

(Dr. P. Ashok Babu, IAS)  
Mission Director  
National Health Mission, Assam


Memo No: NHM/NIN-to-HFI/2866/2015-16/ ২৩৭ ১২-১১

Dated: 18<sup>th</sup> March 2016

Copy to:

- 1) PS to Additional Secretary, Ministry of Health & Family Welfare, Government of India, Nirman Bhawan, New Delhi - 110011.
- 2) PS to the Additional Chief Secretary to the Govt. of Assam, Health & Family Welfare Department.
- 3) The Commissioner & Secretary to the Govt. of Assam, Health & Family Welfare Department, for favour of kind information.

- 4) The Commissioner Health (J.B.), Govt. of Assam, for favour of information.
- 5) The Principal Secretary of Autonomous Councils/ Deputy Commissioner cum Chairman District Health Society, ..... (All Districts).
- 6) The Executive Director, NHM, Assam.
- 7) The Director of Health Services, Assam.
- 8) The Director of Health Services (FW), Assam.
- 9) The Joint Director of Health Services, ..... (All Districts), for information and necessary action.
- 10) District Programme Manager, ..... (All Districts), for information and necessary action.

  
Mission Director  
National Health Mission, Assam



## OFFICE OF THE MISSION DIRECTOR, NATIONAL HEALTH MISSION, ASSAM

Saikia Commercial Complex, G. S. Road, Christianbasti, Guwahati - 781005

Web site : <http://www.nrhmassam.in> :: E\_mail ID : [misnrhm.assam@gmail.com](mailto:misnrhm.assam@gmail.com)

No.: NHM/NIN-to-HFI/2866/2015-16/ 1407

Dated: 17/05/2016

To,

✓ Shri Sunil Sharma, IRPS  
Joint Secretary to the Government of India  
Ministry of Health & Family Welfare  
Nirman Bhawan, New Delhi - 110108

Office of Joint Secretary  
274861/16  
23151/6

**Sub: Nomination of Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.**

Ref :

1. Letter No: Z-18015/1/2016-eGov dated 28<sup>th</sup> April 2016
2. This office letter no: NHM/NIN-to-HFI/2866/2015-16/27711 dated 18<sup>th</sup> March 2016
3. Letter No Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016

Sir,

With reference to the subject cited above, I would like to inform you that, intimation regarding nomination of Nodal officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal was communicated to the National Coordinator, National Coordination Unit, Centre for Health Informatics (CHI), National Institute of Health and Family Welfare, New Delhi - 110067 vide this office letter no: NHM/NIN-to-HFI/2866/2015-16/27711 dated 18<sup>th</sup> March 2016. Copy of the letter enclosed. The nomination letter was also forwarded to email id [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) and [at@nihfw.org](mailto:at@nihfw.org) as communicated vide letter no: Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016 from Additional Secretary, Government of India, Ministry of Health & Family Welfare. The verification of health facilities could not be carried out for want of login information in the portal.

As communicated in the letter mentioned above, following officer is nominated as State Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal:

Dr. P. Ashok Babu, IAS  
Mission Director  
National Health Mission, Assam  
Saikia Commercial Complex  
G. S. Road, Christianbasti, Guwahati - 781005  
Phone No: +91-361-2340239  
Email ID: [mdnrhmasm@gmail.com](mailto:mdnrhmasm@gmail.com)

Further, District Programme Managers of all Districts of Assam have been nominated as District Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

It is requested to provide the login credential of NIN Portal to carry out the verification process.

Yours faithfully,

Enclosure: As stated above.

(Dr. P. Askok Babu, IAS)

Mission Director  
National Health Mission, Assam

To (SS)-on to  
Jr (chow)

Memo No: NHM/NIN-to-HFI/2866/2015-16/ 1408-13

Dated: 17/05/2016

Copy to:

- 1) PS to Additional Secretary, Ministry of Health & Family Welfare, Government of India, Nirman Bhawan, New Delhi – 110011.
- 2) PS to the Additional Chief Secretary to the Govt. of Assam, Health & Family Welfare Department.
- 3) The Commissioner & Secretary to the Govt. of Assam, Health & Family Welfare Department, for favour of kind information.
- 4) The Commissioner Health (J.B.), Govt. of Assam, for favour of information.
- 5) Shri Jitendra Arora, Director (eHealth), Ministry of Health & Family Welfare, Room No 307D, Nirman Bhawan, New Delhi – 110108, for favour of information.
- 6) The National Coordinator, National Coordination Unit, Centre for Health Informatics (CHI), National Institute of Health and Family Welfare, Baba Gang Nath Marg, Munirka, New Delhi – 110067, for information.

  
Mission Director  
National Health Mission, Assam



## OFFICE OF THE MISSION DIRECTOR, NATIONAL HEALTH MISSION, ASSAM

Saikia Commercial Complex, G. S. Road, Christianbasti, Guwahati - 781005

Web site : <http://www.nrhmassam.in> :: E\_mail ID : [misnrhm.assam@gmail.com](mailto:misnrhm.assam@gmail.com)

No.: NHM/NIN-to-HFI/2866/2015-16/ 27711

Dated: 18<sup>th</sup> March 2016

To,

The National Coordinator  
National Coordination Unit  
Centre for Health Informatics (CHI)  
National Institute of Health and Family Welfare  
Baba Gang Nath Marg, Munirka, New Delhi - 110067

**Sub:** Nomination of Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

**Ref:** Letter No Z-18015/1/2016-eGov dated 3<sup>rd</sup> February 2016

Sir,

With reference to the subject cited above, I would like to inform you that, following officer is nominated as State Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal:

Dr. P. Ashok Babu, IAS  
Mission Director  
National Health Mission, Assam  
Saikia Commercial Complex  
G. S. Road, Christianbasti, Guwahati - 781005  
Phone No: +91-361-2340239  
Email ID: [mdnrhmasm@gmail.com](mailto:mdnrhmasm@gmail.com)

You are requested to provide the login credential of NIN Portal.

Further, District Programme Manager of all Districts of Assam has been nominated as District Nodal Officer for "National Identification Number to Health Facilities of India (NIN-to-HIF)" Portal.

Yours faithfully,

(Dr. P. Ashok Babu, IAS)  
Mission Director  
National Health Mission, Assam

Memo No: NHM/NIN-to-HFI/2866/2015-16/ 27712-11


Dated: 18<sup>th</sup> March 2016

Copy to:

- 1) PS. to Additional Secretary, Ministry of Health & Family Welfare, Government of India, Nirman Bhawan, New Delhi - 110011.
- 2) PS to the Additional Chief Secretary to the Govt. of Assam, Health & Family Welfare Department.
- 3) The Commissioner & Secretary to the Govt. of Assam, Health & Family Welfare Department, for favour of kind information.

Receipt No : 487754/2017/E-GOVERNANCE

- 2) The Commissioner Health (J.B.), Govt. of Assam, for favour of information.
- 5) The Principal Secretary of Autonomous Councils/ Deputy Commissioner cum Chairman District Health Society, ..... (All Districts).
- 6) The Executive Director, NHM, Assam.
- 7) The Director of Health Services, Assam.
- 8) The Director of Health Services (FW), Assam.
- 9) The Joint Director of Health Services, ..... (All Districts), for information and necessary action.
- 10) District Programme Manager, ..... (All Districts), for information and necessary action.

  
Mission Director  
National Health Mission, Assam

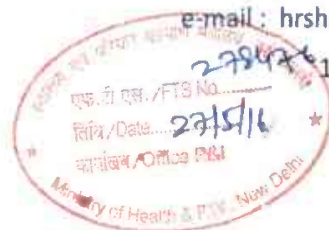
Receipt No : 487754/2017/E-GOVERNANCE

**H. R. Sharma**  
(IAS, Shaurya Chakra)  
**Mission Director (NHM)**



**Directorate of Health Services**  
Swasthya Sadan, Kasumpti,  
Shimla-171009 (H.P.)  
Phone : 0177-2624505  
Resi. : 0177-2629975  
Mobile : 98055-05507  
e-mail : hrsharma61@hotmail.com

Ref No. HFW-H/NRHM/IT/ 2008 -19604



13<sup>th</sup> May 2016

Dear Sh. Sharma ji,

This is with reference to the generation of National Identification Number (NIN) for the health facilities in Himachal Pradesh. In this, regard, it is informed that we are not able to start the generation of National Identification Number for the facilities because all the health blocks are not listed under NIN application. We have taken up the matter with concerned officers / officials but so far all the block medical offices (Health Blocks) have not been mapped under NIN application. Copy of details of correspondence done with concerned officers / officials along with list of health blocks (to be mapped) is attached for reference.

In view of this, it is requested that all the health blocks may be added / mapped in NIN application, so that we can start the generation of National Identification Number for the health facilities in Himachal Pradesh

Warm regards!

PSA JS/EPN/SS/

CH1 (Anshu Tinsakh)  
Yours Sincerely,  
H.R. Sharma  
27/5/16

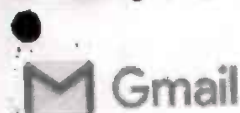
**Sh. Sunil Sharma, IRPS**  
Joint Secretary,  
Ministry of Health & Family Welfare,  
Nirman Bhawan, New Delhi-110108

Ag/ehw/



Gmail - Regarding NIN Verification process of Health Facilities in Himachal Pradesh State

Page 1 of 2



MIS NRHM H.P. &lt;misnrhmhp@gmail.com&gt;

**Regarding NIN Verification process of Health Facilities in Himachal Pradesh State****Saurabh Kumar** <saurabh@nhp.gov.in>

Wed, May 11, 2016 at 11:41 AM

To: "MIS NRHM H.P." &lt;misnrhmhp@gmail.com&gt;

Cc: md-hp-nrhm &lt;md-hp-nrhm@nic.in&gt;, ankit.tripathi@gov.in, at@nihfw.org, jitendra.arora@gov.in

Dear Sh. Devender Sen,

I will confirm back soon.

Best Regards,

Saurabh Kumar

**From:** MIS NRHM H.P. [mailto:misnrhmhp@gmail.com]**Sent:** Tuesday, May 10, 2016 7:46 PM**To:** Saurabh Kumar**Cc:** md-hp-nrhm; ankit.tripathi@gov.in; jitendra.arora@gov.in**Subject:** Re: Regarding NIN Verification process of Health Facilities in Himachal Pradesh State

Dear Mr. Saurabh Kumar,

This is with reference to the generation of National Identification Number (NIN) for the health facilities.

In this regard, kindly refer to my previous mails and subsequent telephonic talks regarding non listing of Health Blocks under NIN application. As already informed, many block medical offices are not listed / displayed in the application (list has been shared in the previous mail). As a result of this, we are not able to start generation of National Identification Number (NIN) / verification of facilities.

Kindly let us know the time line by which the problem will be resolve so that we can start generation of NIN for the facilities.

Regards

Devender Sen

Consultant MIS (NHM)

Himachal Pradesh

On Tue, May 10, 2016 at 2:35 PM, Saurabh Kumar &lt;saurabh@nhp.gov.in&gt; wrote:

<https://mail.google.com/mail/u/0/?ui=2&ik=bfd2611d57&view=pt&cat=NIN&search=cat&m...> 13-05-2016



Gmail - Regarding NIN Verification process of Health Facilities in Himachal Pradesh State

Page 2 of 2

Dear Sh. Divender Sen,

Kindly refer to the DO Letter No. Z – 18015/1/2016-e-Gov, dated 3<sup>rd</sup> Feb 2016.

Our recent records indicate that out of total **2987** no. of Health Facilities in your state, no verification by Nodal Officer have been completed till date. We request that you being the NIN Nodal officer of **Himachal Pradesh** state, to speed up and complete the verification activity of Health Facilities in your state at the earliest.

Steps to be followed:-

1. Login to National Identification Number portal at: - <http://nin.nhp.gov.in/> and enter your login credentials (please contact below mentioned persons for any issue)
2. Your District Officer needs to confirm the existence of Health Facility and its attributes as per the given format.
3. After the verification at District level by the district officer, the State Nodal Officer needs to confirm the verification of the Health Facility and its attributes.

I have attached help documents with this email, you may contact below mentioned persons for any queries related to NIN:-

Name	Contact Number	Email ID
Shri. Ankit Tripathi, AD , Centre for Health Informatics, New Delhi	+91 7838363525	ankit.tripathi@gov.in
Mr. Saurabh Kumar, Associate Consultant, Centre for Health Informatics, New Delhi	+91 9855226374	saurabh@nhp.gov.in

Thank you for your cooperation.

Regards,

Saurabh Kumar

Associate Consultant, CHI

M: +91 9855226374

Regards

Devender Sen

Consultant, MIS (NHM)

Directorate of Health Services

Shimla-171009 (H.P.)

<https://mail.google.com/mail/u/0/?ui=2&ik=bfd2611d57&view=pt&cat=NIN&search=cat&m...> 13-05-2016

Receipt No : 487754/2017/E-GOVERNANCE

Sr.No.	District	Name of Block	Remarks
1	Bilaspur	Ghumarwin	available
2	Bilaspur	Jhanduta	available
3	Bilaspur	Markand (Sadar)	Not listed
4	Chamba	Bharmour	available
5	Chamba	Killar	Not listed
6	Chamba	Pukhari	Not listed
7	Chamba	Choori	Not listed
8	Chamba	Tissa	Not listed
9	Chamba	Samote	Not listed
10	Chamba	Kihar	Not listed
11	Hamirpur	Sujanpur Tira	Not listed
12	Hamirpur	Nadaun	available
13	Hamirpur	Barsar	Not listed
14	Hamirpur	Bhoranj	available
15	Hamirpur	Tauni Devi	Not listed
16	Hamirpur	Galore	Not listed
17	Kangra	Shahpur	Not listed
18	Kangra	Nagrota Bagwan	available
19	Kangra	Thural	Not listed
20	Kangra	Gangath	Not listed
21	Kangra	Indora	available
22	Kangra	Jawalamukhi	Not listed
23	Kangra	Mahakal	Not listed
24	Kangra	Tyara	Not listed
25	Kangra	Bhawarna	available
26	Kangra	Gopalpur	Not listed
27	Kangra	Nagrota Surian	available
28	Kangra	Dadasiba	Not listed
29	Kangra	Fatehpur	Not listed
30	Kinnaur	Nichar	available
31	Kinnaur	Pooh	available
32	Kinnaur	Sangla	Not listed
33	Kullu	Anni	available
34	Kullu	Banjar	available
35	Kullu	Jari	Not listed
36	Kullu	Naggar	available
37	Kullu	Nermand	available
38	Lahul & Spiti	Kaza	Not listed
39	Lahul & Spiti	Gondhla	Not listed
40	Mandi	Ratti	Not listed
41	Mandi	Kotli	Not listed
42	Mandi	Karsog	available
43	Mandi	Sandhol	Not listed
44	Mandi	Padhar	Not listed
45	Mandi	Ladbharol	Not listed
46	Mandi	Baldwara	Not listed
47	Mandi	Janjehli	Not listed
48	Mandi	Bagsaid	Not listed
49	Mandi	Rohanda	Not listed
50	Mandi	Kataula	Not listed
51	Shimla	Kumharsain	Not listed
52	Shimla	Nankhari	available
53	Shimla	Kotkhali	Not listed
54	Shimla	Chirgaon	Not listed
55	Shimla	Nerwa	Not listed
56	Shimla	Matiana	Not listed
57	Shimla	Mashobra	available
58	Shimla	Tikkar	Not listed
59	Shimla	Rampur	Not listed
60	Sirmaur	Shillai	available
61	Sirmaur	Dahgera	Not listed
62	Sirmaur	Rajpura	Not listed
63	Sirmaur	Sarahan	Not listed
64	Sirmaur	Sangrah	available
65	Solan	Nalagarh	Not listed
66	Solan	Arki	Not listed
67	Solan	Dharampur	available
68	Solan	Syri	Not listed
69	Solan	Chandi	Not listed
70	Una	Haroli	Not listed
71	Una	Thanakalan	Not listed
72	Una	Gagret	available
73	Una	Amb	Not listed

Receipt No : 487754/2017/E-GOVERNANCE

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)

5/27/2016

Subject: **Regrading National Identification Number to Health Facilities - Punjab**

To: sunil.sharma62@gov.in

Cc: Hussan Lal &lt;mdnrhmpunjab@gmail.com&gt;, ankit.tripathi@gov.in

Date: 05/27/16 01:31 PM

From: Satinderpal Singh Chahal &lt;chinhmpb@gmail.com&gt;

DO-NIN.jpg (2.9MB)

279043/16  
27/5/16

**Respected Sir,**

Please find attached the DO Letter regarding the National Identification Number to Health Facilities.

In NIN Web-portal, health blocks are not visible in State of Punjab due to non-availability of MDDS Codes which further delays the verification of health facilities.

**Thanks & Regards**

**Satinderpal Singh Chahal**  
**Consultant - Health Informatics**  
State Health Systems Resource Center  
National Health Mission, Punjab  
Deptt. of Health & Family Welfare  
R.No.13, Prayass Building, Sec-38B,  
Chandigarh, India - 160036  
0172-4012025, 88720-90037

DO-NIN.jpg

Dr(e-gov) / CHI San Ankit Tripathi  
R. sec. d. 27/5/16

5/27/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)

**Hussan Lal, IAS**  
Secretary-cum-Mission Director,  
NHM, Punjab

**ਹੁਸਨ ਲਾਲ**, ਆਈ.ਏ.ਐਸ.  
ਸਕੱਤਰ-ਕਮ-ਮਿਸ਼ਨ ਡਾਇਰੈਕਟਰ  
ਐਨ.ਐਚ.ਐਮ, ਪੰਜਾਬ



ਪੰਜਾਬ ਸਰਕਾਰ,  
ਸਿਹਤ ਤੇ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ,  
ਚੰਡੀਗੜ੍ਹ  
Government of Punjab,  
Department of Health & Family Welfare

ਅਧ. ਸ. ਪੰ. ਨੰ / D.O.No/NHM/PB/CH/2016/24633

ਮਿਤੀ/ Date 27.05.2016

**Subject: National Identification Number to Health Facilities - regarding.**

Dear Sh. Sharma ji,

Kindly refer to your DO letter No. Z-18015/1/2016-eGov dated 28.04.2016 on the subject cited.

State of Punjab has initiated the identification of health institutions for unique number called National Identification Number (NIN) based on the directions from Government of India through NIN web-portal. In NIN web-portal, only those health blocks of State of Punjab are visible where administrative and health blocks are same, but these are very few in number. This matter has already been conveyed to Mr. Ankit Tripathi and Mr. Vineet Chawla of your office through email (on dated 05.04.2016 and 12.03.2016) and also via telephonic conversation by the Nodal Officer -NIN from State of Punjab, but till date the problem is yet to be resolved.

Due to non-visibility of health blocks in NIN web-portal, the State is lacking in verification of health institutions and once these health blocks are visible in NIN web-portal, it will be verified immediately.

I hope, you will personally look into this issue and once it is resolved, State will verify the health institutions for National Identification Number.

With warm regards,

Yours sincerely,

(Hussan Lal)

**Sh. Sunil Sharma, IRPS**  
Joint Secretary,  
Government of India,  
Ministry of Health & Family Welfare,  
Nirman Bhawan, New Delhi-110108

**NATIONAL HEALTH MISSION, PUNJAB**  
Prayaas Building, 5th Floor, Sector 38-B, Chandigarh  
Phone : +91-172-2688438, 4012011. Fax: +91-172-4012012-13  
e-mail : mdnrhmpunjab@gmail.com

**ਨੈਸ਼ਨਲ ਹੈਲਥ ਮਿਸ਼ਨ, ਪੰਜਾਬ**  
ਪਰਿਆਸ ਬਿਲਡਿੰਗ, ਪੰਜਵੀਂ ਮੰਜਿਲ, ਸੈਕਟਰ 38-ਬੀ, ਚੰਡੀਗੜ੍ਹ।  
ਫੋਨ ਨੰ: +91-172-2688438, 4012011. ਫੈਕਸ : +91-172-4012012-13  
ਈ-ਮੇਲ : mdnrhmpunjab@gmail.com

Receipt No : 487754/2017/E-GOVERNANCE

5/19/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)Subject: **RE: Proposal- Adoption of GLN in NIN**

To: Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Date: 05/19/16 10:18 AM

Cc: "sunil.sharma62@gov.in" &lt;sunil.sharma62@gov.in&gt;, ANKIT TRIPATHI &lt;ankit\_tripathi11@hotmail.com&gt;

From: S Swaminathan &lt;swami@gs1india.org&gt;

Dear Mr. Jitendra Arora,

Thank you for your mail and sorry for the delay in the formal response .

Please find below our recommendations based on the discussion held in your office on 11<sup>th</sup> May, Wednesday.

To ensure interoperability and uniqueness between the registries and also keeping into considerations of E-Health Records we propose the various options.

**Option 1:**

Convert the 10 digit NIN number to 13 digit using the prefix "29" as illustrated below:

Prefix	NIN	Check Sum	NIN : 13 Digit Format
29	2777285370	3	2927772853703
29	1328875776	5	2913288757765

or

Prefix	NIN	Check Sum	NIN : 13 Digit Format
290	277728537	9	2902777285379
290	132887577	4	2901328875774

Allocate the 13 digit NIN number to all the Government hospitals

For private hospitals, allocate unique id (GLN) through ROHINI

Establish interoperability with ROHINI portal and National Health Portal through an API

ROHINI data can be made available in National Health Portal and vice versa using the Unique ID's(NIN and GLN)

This model ensures interoperability between ROHINI and National Health Portal

**Limitation: This model does not allow interoperability with global registries and works with in closed loop.****There is no cost implications****Option 2:**

Allocate 13 digit GLN for each of the Government hospitals (890 series) from the Global GLN registries which shall be unique in the world.

A separate series can be allocated for government hospitals for easy identification

Establish interoperability with ROHINI portal and National Health Portal through an API

ROHINI data can be made available in National Health Portal and vice versa using the Unique ID's(GLN)

This model ensures interoperability between ROHINI and National Health Portal and also with global registries

**Note: There is a cost implications which has been mentioned in the proposal submitted earlier.****Option 3**

Government Hospitals to follow NIN while private hospitals adopt GLN allocated from ROHINI by IIB and work on data sharing instead of allocating another code for private hospitals

Keeping the entire health eco system we don't recommend allocating two unique identities to the same hospital.

Receipt No : 487754/2017/E-GOVERNANCE

5/19/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0_15121607)

At a time convenient to you and JS in the coming week ( after Tue) we could over to your office for discussion on this subject.

With regards,

S.Swaminathan  
General Manager

**GS1 India**  
(under Min. of Commerce, Govt. of India)

330, 2<sup>nd</sup> Floor, 'C' Wing, August Kranti Bhawan,  
Bhikaji Cama Place, New Delhi - 110066

T +91-11-42890890

F +91-11-26168730

E [swami@gs1india.org](mailto:swami@gs1india.org)

W <http://www.gs1india.org>

**From:** Jitendra Arora [<mailto:dir.ehealth@gmail.com>]

**Sent:** 26 April 2016 19:28

**To:** S Swaminathan <[swami@gs1india.org](mailto:swami@gs1india.org)>; ANKIT TRIPATHI <[ankit\\_tripathi11@hotmail.com](mailto:ankit_tripathi11@hotmail.com)>

**Cc:** [sunil.sharma62@gov.in](mailto:sunil.sharma62@gov.in)

**Subject:** Re: Proposal- Adoption of GLN in NIN

Dear Sir,

A meeting was convened with GS1 India officials on 26<sup>th</sup> April 2016 at MoHFW in my chamber to discuss National Identification Number (NIN) to Government and Private Health Facilities across India.

2. The Insurance Information Bureau (IIB) have collaborated with GS1 India, promoted by Ministry of Commerce for providing hospitals a 13 digit globally unique ID and Geo coding is being done based on their address. It was also informed under the above mentioned initiative that Hospital Self Service Portal will allow hospitals to register and edit information and provide an electronic exchange of medical records between hospitals and insurance companies to ensure faster claims processing.

3. At the same time, Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility by state Govt. NIN-to-HFI application is available at <http://nin.nhp.gov.in>.

4. The two applications were discussed in details and it has been decided to explore the following options on mutual consent for interlinking the above two applications and to reach towards uniformity:

- MoHFW may upgrade the existing 10 Digit National Identification Number (NIN) for Government health facilities to 13 Digit number according to GS1 format without any financial implication if agreed by IIB / GS1 and approved by MoHFW.
- MOHFW propose to adopt 13 digit unique numbers (GS1) being allotted for Private Health Facilities by IIB into its system if approved and agreed.

Receipt No : 487754/2017/E-GOVERNANCE

**Sunil Sharma, IRPS**  
Joint Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23061773  
Fax : 91-11-23062157  
E-mail : sunil.sharma62@gov.in

No. Z-18015/1/2016-eGov

Dated: 27.04.16

Dear *Dr. Gupta*,

As you may be aware, each health facility in India is to be assigned a unique number called National Identification Number (NIN). Assignment of this number is a prerequisite for creation of interoperable health records.

The Ministry of Health and Family Welfare has already assigned NIN to each health facility covered under MCTS. In this regard, all states have been advised to get the verification of all their health facilities with their attributes. As also emphasized vide DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016, this verification exercise is needed to be carried out on emergent basis.

However, review of the position reveals that in your states, out of total 70 Health Facilities available, no verification has been made up till now on the portal, whereas the verification exercise was sought to be completed by March, 2016.

I may request you to personally monitor this activity and get the verification of all the health facilities in the state and at the district level completed by 10<sup>th</sup> of May, 2016, positively. (Sh. Pankaj Rahi has been appointed as the nodal officer from your state for this work)

*With best wishes,*

**Dr. Vanita Gupta**  
Director Health & Family Welfare  
& Mission Director (NHM) U.T.,  
Community Health Centre,  
Sector- 22, CHANDIGARH-160022

Yours sincerely,

*(Signature)*  
27/4/16  
(Sunil Sharma)



**National Health Mission**



26/4/2016

## Annexure

## The status of verification of Health facilities being performed different states

S.No	State Name	Nodal Officer Appointed (Y/N)	Total Health Facilities	Verification Process	
				STAGE - 1 Confirmed Count by District officer	STAGE - 2 Verified Count by State Nodal officer
1	Andhra Pradesh	N	9231	0	0
2	Andman & Nicobar	N	165	0	0
3	Arunachal Pradesh	N	806	0	0
4	Assam	N	6699	0	0
5	Bihar	N	12662	0	0
6	Chandigarh	Y	70	0	0
7	Chhattisgarh	Y	6513	6306	5684
8	Dadra & Nagar Haveli	Y	92	0	0
9	Daman & Diu	Y	30	0	0
10	Delhi	Y	3031	0	0
11	Goa	Y	245	242	232
12	Gujarat	Y	9353	0	0
13	Haryana	Y	3863	2123	0
14	Himachal Pradesh	Y	2987	0	0
15	Jammu & Kashmir	Y	3445	0	0
16	Jharkhand	N	4730	0	0
17	Karnataka	Y	13512	5849	358
18	Kerala	Y	7027	0	0
19	Lakshadweep	N	25	0	0
20	Madhya Pradesh	Y	10772	5756	915
21	Maharashtra	Y	13917	13091	7255
22	Manipur	N	523	0	0
23	Meghalaya	Y	785	0	0
24	Mizoram	Y	542	0	0
25	Nagaland	Y	786	0	0
26	Orissa	Y	7982	3858	0
27	Puducherry	Y	134	0	0
28	Punjab	Y	3876	671	0
29	Rajasthan	Y	19284	12639	2
30	Sikkim	Y	226	3	0
31	Tamil Nadu	Y	12983	11145	7451
32	Telangana	Y	5966	0	0
33	Tripura	N	1149	0	0
34	Uttar Pradesh	N	28606	0	0
35	Uttarakhand	Y	2474	0	0
36	West Bengal	Y	11631	6861	0
Total		(Y=26, N=10)	206122	68544	21897





DRAFT (01 April 2016)



**World Health Day 2016**  
**Beat Diabetes**

**7 April 2016**  
**Oval Room, Hyatt Regency, New Delhi**

9:15–9:45	Registration
9:45–9:50	Welcome and WHD2016 Video
<b>Inaugural Session</b>  10:00 - 11:15	<b>Dignitaries felicitation</b>  <b>Lighting the Lamp</b>  Opening Address by <b>Dr Henk Bekedam</b> , WHO Representative to India Address by <b>Mr Anshu Prakash</b> , Joint Secretary, Ministry of Health & Family Welfare Address by <b>Dr Arun Panda</b> , Additional Secretary, Ministry of Health & Family Welfare Address by <b>Mr C.K. Mishra</b> , Additional Secretary, Ministry of Health & Family Welfare Address by <b>Dr Jagdish Prasad</b> , Director General Health Services Address by <b>Dr Soumya Swaminathan</b> , Secretary, Department of Health Research & Director General, Indian Council of Medical Research (ICMR) Address by <b>Mr B.P.Sharma</b> , Secretary, Ministry of Health & Family Welfare Address by <b>Mr Shripad Yasso Naik</b> , Hon'ble Minister of State for Health & Family Welfare  Launch of new initiatives <ul style="list-style-type: none"> <li>– WHO Global Report on Diabetes</li> <li>– WHO India Technical Report on Diabetes in India</li> <li>– ICMR India DIABetes [INDIAB] Study Phase I</li> <li>✓ National Health Portal Initiatives on NCDs (Swasthya Bharat Application)</li> <li>→ 'ANMOL' → Swasthya Bharat Mobile Application</li> <li>– 'e-RaktKosh'</li> <li>– India Fights Dengue App</li> <li>– Guidelines on Dialysis in a PPP Mode</li> </ul> Address by <b>Mr Jagat Prakash Nadda</b> , Hon'ble Minister of Health & Family Welfare  Vote of thanks by <b>Dr Prakin Suchaxaya</b> , Coordinator Health Programme, WHO India



Receipt No : 487754/2017/E-GOVERNANCE

26/4/2016 Appointed Nodal Officers (state wise)

## National Identification Number (NIN) Nodal Officers List

S. No.	State	Name	Designation	Contact Number	Email ID	Status
1	Chattisgarh	Sh. C.C. Santosh	Program Manager HMIS SPMU, NRHM, Raipur, Chhattisgarh	Tel. (0771) 2511301 Mob. 9425513063	hmiscg@gmail.com	
2	Chandigarh	Sh. Pankaj Rahi	Manager I.T. Cum HMIS/M&E	9501800303	nrhmchd@gmail.com	
3	Haryana	Sh. Karan Khurana	MCTS State HQ, Haryana	8558894141	mo-mcts.nhm-	
4	Karnataka	Smt. B. Vinutha Rani	Demographer, Health and Family Welfare Services, Anand Rao Circle, Bangalore - 560 009. HMIS / MCTS TEAM, KARNATAKA	9449843357	demohealthkar@gmail.com	
5	Madhya Pradesh	Mr. Neeraj Shrivastava	Consultant - HMIS/MCTS, National Health Mission, MP	9425303229	sdoneeraj@gmail.com	
6	Maharashtra	Dr. Patil	Superintendent Engineer	9422153214	ldw.mumbai@gmail.com	
7	Nagaland	Dr. Lal Chhuan Awma	State Nodal Officer ME	9436372429; 9862787705	chuchunoma@gmail.com	
8	Odisha	Sh. Sanjib Kumar Sutar	State Data Manager, Mission Directorate, National Health Mission, Odisha Annex Building SIHFU, Unit - 8, Bhubaneswar, Odisha		sdo1nrhm@gmail.com	
9	Puducherry	Dr. J. Allirani	Deputy Director (FW&MCH) Puducherry	9443960200	ddfwmcchdy@gmail.com	
10	Punjab	Sh. Satinderpal Singh Chahal	Consultant - Health Informatics State Health Systems Resource Center National Health Mission, Punjab Deptt. of Health & Family Welfare R.No.13, Prayass Building, Sec-38B, Chandigarh, India - 160036	8872090037	chinhmph@gmail.com	
11	Rajasthan	Ms. Shakuntala Choudhary	State Demographer & Evaluation Officer, Rajasthan	0172-4012025, 88720-90037		
12	Tamil Nadu	Mr. R. Palanivelan	Assistant Director (Statistics) State Health Society, National Health Mission Tamil Nadu. Chennai - 600 006	9489048907	srhm.tn@nlc.in. shsmtn@gmail.com	
13	Meghalaya	Mr. Mac G L Nongplur	State MCTS Co-Ordinator NRHM, Meghalaya	9436105419	sdmpromis.megh@gmail.com	
14	Goa	Dr. Vandana Dume	Chief Medical Officer, State Family Welfare Bureau, Directorate of Health Services, Panaji-Goa	9011025029, 0832-2225976	sfwbgoa@hotmail.com	
15	Uttarakhand	Dr. Nidhi Rawat	Uttarakhand Health & Family Welfare Society (Room No 22), Ground Floor Central Building, Directorate of Medical Health & Family Welfare, Village Danda Lakhond, P.O. Gujara, Sahasradhara Road, Dehradun, Uttarakhand.	9412046866	nidhirawatnegi@gmail.com	
16	Kerala	Sh. G. Sunil Kumar	State Programme Manager, National Health Mission, Kerala, Thiruvananthapuram	8943777106	spmnrm2015@gmail.com	
17	Daman & Diu	Dr. Trushar Parmar	State Program Manager (NHM), State Health Society, UT of Daman & Diu	7574858468	dpodaman@gmail.com	
18	West Bengal	Ms. Sanghamitra Ghosh	State Statistical Manager National Rural Health Mission Health & Family Welfare Department Government of West Bengal	033- 23330336 09231846477	sanghamitraghosh@yahoo.com	
19	Dadra & Nagar Haveli	Mr. Kirat Parmar	State Data Manager	0260 - 2632126; Mr. Silvassa (Reference): 9824096363		
20	J & K	Mr. Athar Ali Mir	State Programme Manager M & E, (HMIS/MCTS/IT)	+91 849198021	spmnrmjk@gmail.com	
21	Gujarat	Dr. Prakash Vaghela	Deputy Director (Rural Health)	9978909989	ddrhguj@gmail.com	
22	Himachal Pradesh	Shri. Divender Sen	Consultant MIS	9418471840		
23	Mizoram	Dr. R. Lalchuanawma	State Nodal officer, ME	09436372429 09862787705	chuchunoma@gmail.com	
24	New Delhi	Ms. Jalshree Dash	MIS Expert, Delhi State Health Mission	011- 23812904	dshmhms@gmail.com	
25	Odisha	Sh. Sanjib Kumar Sutar	State Data Manager, Mission Directorate, National Health Mission, Odisha	9439994836		
26	Telangana	Shri S. Gopikanth Reddy	Chief Information Officer, FAC, NHM, Telangana	7893824242	cionhmnts@gmail.com	

Receipt No : 487754/2017/E-GOVERNANCE



# National Health Mission, Odisha

Department of Health & Family Welfare,  
Government of Odisha.

Letter No.: OSH &amp; FWS/4612

Ref: 514/14

From

Shalini Pandit, I.A.S.,  
Mission Director, NHM  
National Health Mission, Odisha.

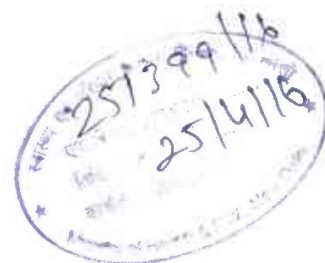


To

K B Agarwan, I.A.S.  
Additional Secretary  
Government of India  
Ministry of Health and Family Welfare

Sub: - Nomination of Nodal Officer for NIN to HFI

Ref: - Letter No. Z -18015 /1/2016 – e-Gov dated 3.2.2016



Madam/ Sir

With reference to the subject and reference letter mentioned above, it is to inform you that NIN to HFI portal verification has already been started and will be completed by end of April 2016. In this regard, Mr. Sanjib Kumar Sutar, State Data Manager, Mission Directorate NHM Odisha (Mobile No- 9439994836), has been nominated as the Nodal Officer for NIN to HFI for further correspondence. An e-mail in this regard has already been communicated on dated 25<sup>th</sup> Feb 2016.

Yours faithfully,

*[Signature]*  
Mission Director,  
NHM, Odisha

Dated – 18.04.16

Memo No. 4613

Copy forwarded Team NIN, National Coordination Unit, Center for Health Informatics (CHI), NIHFW, Munirka, New Delhi- 110067 for information and necessary support.

*[Signature]*  
Mission Director,  
NHM, Odisha

Receipt No : 487754/2017/E-GOVERNANCE

4/26/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)Subject: **Fwd: National Identification Number to Health Facilities of India (NIN-to-HFI).**

To: secytran.pon@nic.in, lk-coll@nic.in, lk-admin@nic.in, pshealth@nic.in, devcom-dd@nic.in, gtndhas220658@gmail.com, prin.secy.wbhealth@gmail.com, hfwsec@gmail.com, pshfwpunjab@gmail.com, pspubhealth@gmail.com, prs-hfw@karnataka.gov.in, acshealth2015@gmail.com, secports-sect.goa@nic.in, tshealthpeshi@gmail.com, prl.secy.hmfwap@gmail.com, poonam.malakondaiah@gmail.com, healthsecyskm@yahoo.com, secretarytrp11@gmail.com, mpattoncs15@gmail.com, hmingtea.ias@gmail.com, ytsering@yahoo.com, secy-hfw-arn@nic.in, bolung.siram@yahoo.com, offaddlcstocmassam@outlook.com, vineetchawdhry@hotmail.com, secyhealthjk@gmail.com, 2712066@gmail.com, psecup.health@gmail.com, orhealth@nic.in, phsrajasthan@gmail.com, pshealth@mp.gov.in, sec-health-jhr@nic.in, hlthdept.fdi@gmail.com, sheelv@nic.in, health-bih@nic.in, secy.hlth@kerala.gov.in, secph-hfwd@gujarat.gov.in, hs-chd@nic.in

Cc: ed\_shsb@yahoo.co.in, mdnrhmcg@yahoo.co.in, nrhmjharkhand3@gmail.com, missiondirectormp@gmail.com, md-nrh-m-rj@nic.in, missiondirector@nic.in, nrhmorissa@ori.nic.in, mdupnrhm@gmail.com, ed@sifpsa.org, mdnhmuk@gmail.com, mdnhmjk@gmail.com, md-hp-nrh-m@nic.in, mdnrhmasm@gmail.com, md-ar-nrh-m@nic.in, shms99@gmail.com, okramibomcha@yahoo.co.in, mebens@yahoo.com, nrhmmizoram@yahoo.com, nrhmnagaland@gmail.com, shfws\_tripura@yahoo.co.in, mdnrhmsikkim@gmail.com, mdnrhmap@gmail.com, mdnhmts@gmail.com, chfw.ts@gmail.com, peshichfws@gmail.com, directorhealth\_goa@yahoo.co.in, md-nrh-m@gujarat.gov.in, md-hr-nrh-m@nic.in, arogyakeralam@gmail.com, md-pdy-nrh-m@nic.in, nrhmpondicherry@yahoo.co.in, rchlakshadweep@gmail.com, jpchirag@yahoo.co.in, cmodnh@gmail.com, nrhmdnh@gmail.com, dhs\_ut@yahoo.co.in, nrhmchd@gmail.com, dirdhs.and@nic.in, mdnrhm@wbhealth.gov.in, rchpcni@tn.nic.in, nrhmpunjab@gmail.com, mdnrhmpunjab@gmail.com, mdnrhm.mumbai@gmail.com, md-del-nrh-m@nic.in, mdnrhmkar@gmail.com

Bcc: AS <asfnd.kb@gmail.com>, Sunil Sharma JS <sunil.sharma62@gov.in>, ANKIT TRIPATHI <ankit\_tripathi11@hotmail.com>, saubkr@gmail.com, Jitendra Arora <dir.ehealth@gmail.com>

Date: 04/26/16 10:26 AM

From: "JITENDRA ARORA DIRECTOR" &lt;jitendra.arora@gov.in&gt;

NIN - to HFI D.O letter (Principal Secretaries)-.p... (324kB)

Sir/Madam,

Kindly refer to the trailing email from Ministry of Health & FW for generating National Identification Number for all Health Facilities of India (NIN-2-HFI) which will be a unique 10 digit number within India in order to achieve inter-operability between different IT applications at centre and across the States.

2, This application is available on <http://nin.nhp.gov.in>. End-users will be able to confirm by giving NIN through central

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)

1/3

Receipt No : 487754/2017/E-GOVERNANCE


[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)

and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the presence of the facility. User manual for this application is available to the users once they login. There will be two stage verification process at State and District level.

3. You are once again requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) or [saubkr@gmail.com](mailto:saubkr@gmail.com)) if not done earlier.

4. Some of the States have already started the work of verification at fast pace, however it is noticed that there is very slow progress in other States. It is requested that this task may kindly be got completed on top priority as the exercise was to be completed in March, 2016 itself.

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

----- Original Message -----

From:

"JITENDRA ARORA DIRECTOR" <[jitendra.arora@gov.in](mailto:jitendra.arora@gov.in)>

Date: Feb 25, 2016 4:37:07 PM

Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).

To: [prsecy1.and@nic.in](mailto:prsecy1.and@nic.in), [peshihfw@gmail.com](mailto:peshihfw@gmail.com), [secy-hfw-arn@nic.in](mailto:secy-hfw-arn@nic.in), [sanjeeva.k@nic.in](mailto:sanjeeva.k@nic.in), [health-bih@nic.in](mailto:health-bih@nic.in), [hs-chd@nic.in](mailto:hs-chd@nic.in), [devcom-dd@nic.in](mailto:devcom-dd@nic.in), [pshealth@nic.in](mailto:pshealth@nic.in), [sechfwd@gujarat.gov.in](mailto:sechfwd@gujarat.gov.in), [gazzanfer.h@gmail.com](mailto:gazzanfer.h@gmail.com), [sec-health-jhr@nic.in](mailto:sec-health-jhr@nic.in), [bktripathi2012@gmail.com](mailto:bktripathi2012@gmail.com), [prs-hfw@karnataka.gov.in](mailto:prs-hfw@karnataka.gov.in), [secy@health.kerala.gov.in](mailto:secy@health.kerala.gov.in), [sureshbabu.jangala@gmail.com](mailto:sureshbabu.jangala@gmail.com), [ytsering@yahoo.com](mailto:ytsering@yahoo.com), [secretarytrp11@gmail.com](mailto:secretarytrp11@gmail.com), [orhealth@nic.in](mailto:orhealth@nic.in), [secytran.pon@nic.in](mailto:secytran.pon@nic.in), [pshfwpunjab@gmail.com](mailto:pshfwpunjab@gmail.com), [secy-hfw@karnataka.gov.in](mailto:secy-hfw@karnataka.gov.in), [lk-coll@nic.in](mailto:lk-coll@nic.in), [psmededu@mp.gov.in](mailto:psmededu@mp.gov.in), [sec.mededu@maharashtra.gov.in](mailto:sec.mededu@maharashtra.gov.in), [principalsecretary.edu@gmail.com](mailto:principalsecretary.edu@gmail.com), [healthsecyskm@yahoo.com](mailto:healthsecyskm@yahoo.com), [hfwsec@gmail.com](mailto:hfwsec@gmail.com), [secretarytrp11@gmail.com](mailto:secretarytrp11@gmail.com), [secretariatme1@gmail.com](mailto:secretariatme1@gmail.com), [psmededu@gmail.com](mailto:psmededu@gmail.com), [prin\\_secy@wbhealth.gov.in](mailto:prin_secy@wbhealth.gov.in), [tshealthpeshi@gmail.com](mailto:tshealthpeshi@gmail.com)

Cc: [ed\\_shsb@yahoo.co.in](mailto:ed_shsb@yahoo.co.in), [mdnrhmcg@yahoo.co.in](mailto:mdnrhmcg@yahoo.co.in), [nrhnmjharkhand3@gmail.com](mailto:nrhnmjharkhand3@gmail.com), [missiondirectormp@gmail.com](mailto:missiondirectormp@gmail.com), [md-nrhmrj@nic.in](mailto:md-nrhmrj@nic.in), [nrhmorissa@ori.nic.in](mailto:nrhmorissa@ori.nic.in), [missiondirector@nic.in](mailto:missiondirector@nic.in), [mdupnrhm@gmail.com](mailto:mdupnrhm@gmail.com), [ed@sifpsa.org](mailto:ed@sifpsa.org), [mdnhmuk@gmail.com](mailto:mdnhmuk@gmail.com), [mdnhmjk@gmail.com](mailto:mdnhmjk@gmail.com), [md-hp-nrhmrj@nic.in](mailto:md-hp-nrhmrj@nic.in), [mdnrhmasm@gmail.com](mailto:mdnrhmasm@gmail.com), [md-ar-nrhmrj@nic.in](mailto:md-ar-nrhmrj@nic.in), [okramibomcha@yahoo.co.in](mailto:okramibomcha@yahoo.co.in), [shms99@gmail.com](mailto:shms99@gmail.com), [mebans@yahoo.com](mailto:mebans@yahoo.com), [nrhmmizoram@yahoo.com](mailto:nrhmmizoram@yahoo.com), [nrhmnagaland@gmail.com](mailto:nrhmnagaland@gmail.com), [shfws\\_tripura@yahoo.co.in](mailto:shfws_tripura@yahoo.co.in), [maito:mdnrhmsikkim@gmail.com](mailto:maito:mdnrhmsikkim@gmail.com), [mdnrhmap@gmail.com](mailto:mdnrhmap@gmail.com), [poonam.malakondaiah@gmail.com](mailto:poonam.malakondaiah@gmail.com), [pri.sec.y.hmfwap@gmail.com](mailto:pri.sec.y.hmfwap@gmail.com), [mdnhmts@gmail.com](mailto:mdnhmts@gmail.com), [chfw.ts@gmail.com](mailto:chfw.ts@gmail.com), [peshichfwts@gmail.com](mailto:peshichfwts@gmail.com), [directorhealth\\_goa@yahoo.co.in](mailto:directorhealth_goa@yahoo.co.in), [md-nrhmrj@gujarat.gov.in](mailto:md-nrhmrj@gujarat.gov.in), [md-hr-nrhmrj@nic.in](mailto:md-hr-nrhmrj@nic.in), [mdnrhmkar@gmail.com](mailto:mdnrhmkar@gmail.com), [aogyakeralam@gmail.com](mailto:aogyakeralam@gmail.com), [mdnrhm.mumbai@gmail.com](mailto:mdnrhm.mumbai@gmail.com), [nrhmpunjab@gmail.com](mailto:nrhmpunjab@gmail.com),

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)

2/3

Receipt No : 487754/2017/E-GOVERNANCE

4/26/2016

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)

mgnrhmpunjab@gmail.com, rchpcni@tn.nic.in, mdrnm@wbhealth.gov.in, dirdhs.and@nic.in, dhs\_ut@yahoo.co.in, nrhmchd@gmail.com, cmodnh@gmail, comnrhmdnh@gmail.com, jpchirag@yahoo.co.in, as1health.delhi@nic.in, rchlakshadweep@gmail.com, md-pdy-nrhnm@nic.in

Sir/Madam,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) / [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login . There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by **7<sup>th</sup> March, 2016**.

6. A DO letter dated 3rd Feb, 2016 in this regard from Additional Secretary (eGov), MoHFW is attached for further necessary action.

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en&3.0.1.2.0\\_15121607](https://mail.gov.in/iwc_static/layout/shell.html?lang=en&3.0.1.2.0_15121607)

3/3

Receipt No : 487754/2017/E-GOVERNANCE

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0)

Subject: Request to map 7 Health Districts with Facilities

To: ankit\_tripathi11@hotmail.com

Cc: supten@gmail.com

Date: 04/26/16 11:48 AM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;

Sir,

Please refer to Mission Director, NHM, West Bengal's Memo dated 08<sup>th</sup> March, 2016 (Copy encl.) on the subject mentioned above.

2. Govt. of West Bengal has notified 07 more Health Districts in addition to the 20 Revenue Districts reflected in the NIN Portal.

3. In this context you're requested to kindly take the appropriate action for including the 07 newly notified Health Districts in the NIN Portal.

04. In this regard, please find attached the formal communication from the Ministry.

Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health &amp; Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011

Tel: 011 – 2306 2263

Mobile: 9582861973

F No. Z-18015/1/2016-eGov

Government of India / भारत सरकार

D/o Health and Family Welfare/ स्वास्थ्य एवं परिवार कल्याण विभाग

e-Governance Section /(ई गवर्नेस अनुभाग)

\*\*\*\*\*

निर्माण भवन, नई दिल्ली  
दिनांक 25 अप्रैल, 2016

To

Shri Ankit Tripathi  
The Additional Director,  
CHI of NHP  
National Institute of Health and Family Welfare,  
Baba Gang Nath Marg, Munirka, New Delhi - 110067

**Subject: Request to map 7 Health Districts with Facilities.**

Sir,

Please refer to Mission Director, NHM, West Bengal's Memo dated 08<sup>th</sup> March, 2016 (Copy encl.) on the subject mentioned above.

2. Govt. of West Bengal has notified 07 more Health Districts in addition to the 20 Revenue Districts reflected in the NIN Portal.
3. In this context you're requested to kindly take the appropriate action for including the 07 newly notified Health Districts in the NIN Portal.

जितेंद्र अरोड़ा  
(जितेंद्र अरोड़ा)

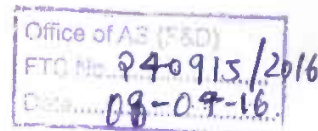
निदेशक (ई गवर्नेस)  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
फोन : 23062317



GOVERNMENT OF WEST BENGAL  
HEALTH & FAMILY WELFARE DEPARTMENT  
NATIONAL HEALTH MISSION (NHM)  
GN -29, 1<sup>ST</sup> FLOOR, GRANTHAGAR BHAWAN,  
SWASTHYA BHAWAN PREMISES, SECTOR -V  
SALT LAKE, BIDHANNAGAR, KOLKATA - 700 091.

033 - 2357 - 7928, 033 - 2357 - 7930,

Email ID: ponrhmbhealth@gmail.com; website: www.wbhealth.gov.in



Memo no: HFW/NHM-143/2016/880

Dated: 8<sup>th</sup> March, 2016

From : Mission Director,  
NHM, West Bengal

To : K B Agarwal, IAS  
Additional Secretary  
Ministry of Health & Family welfare  
Nirman Bhawan, New Delhi - 110108

Sub : Request to map 7(Seven) Health District with facilities

Sir,

Apropos to the captioned subject, Government of West Bengal has notified 07(Seven) more Health Districts in addition to the 20 (Twenty) Revenue Districts already reflected in the NIN portal. Copy of the notification issued by the Government for creation of 7(Seven) Health Districts is annexed. You may kindly like to note that Ministry of Health & Family Welfare has already approved the District Programme Management Units under National Health Mission.

I'd request you to issue necessary instruction for inclusion of 7(Seven) following Health Districts as noted below:

- 1) Nandigram
- 2) Jhargram
- 3) Diamond harbor
- 4) Basirhat
- 5) Asansol
- 6) Rampurhat
- 7) Bishnupur

An early response is requested.

Yours faithfully,  
  
(Mission Director)

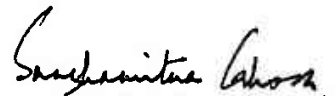
Receipt No : 487754/2017/E-GOVERNANCE

Memo no: HFW/NHM-143/2016/880

Dated: 8<sup>th</sup> March, 2016

Copy forwarded for kind information to:

1. Ankit Tripathy, National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi

  
(Mission Director)

Government of West Bengal  
Department of Health & Family Welfare  
MA Branch  
SWASTHYA BHAWAN  
Wing - 'B', 3<sup>rd</sup> Floor  
GN - 29, Sector - V, Salt Lake City  
Kolkata - 700091  
Telefax No. 2357-4455.

Memo. No. HF/O/MA/935/HHM/1H-151/2012

Date: 21.05..2012

O R D E R

Seven new Health Districts have been formally announced by the State Government at Jhargram, Nandigram, Basirhat, Diamond Harbour, Rampurhat, Bishnupur and Assansol in compliance of all formalities.

To make the new Health Districts functional, it is hereby ordered that a Task Force under the chairmanship of DHS, WB with the following members: (1) Dr. K. K. Adhikari, Joint DHS(P&D), (2) Ms. Mahua Banerjee, Joint Director(Personnel), (3) Mr. S. R. Bhattacharya, Joint Director(AA&V) and (4) Dr. Asit Mandal, Dy. DHS(HA) shall monitor the activities for immediate functioning of the new health districts. They will identify needs of the new Health Districts and take up with the respective branch of the Department or Directorate to clear any bottleneck coming in the way.

Pending posting of regular officers in the post of the CMOH in these 7(seven) Health Districts following officers of the respective districts may remain in temporary charge of the districts as CMOH in addition to their normal duties. Such additional charge of the CMOH shall not be considered as promotion for these officers.

Sl. No.	Name of the Officer with Designation	To hold additional charge of CMOH of
1.	Dr. Himadri Pal, ACMOH, Diamond Harbour.	Diamond Harbour Health District.
2.	Dr. Asit Pande, ACMOH, Basirhat.	Basirhat Health District.
3.	Dr. Girish Chandra Bera, Z.L.O., Bankura.	Bishnupur Health District.
4.	Dr. Sovam Dey, Z.L.O. Birbhum.	Rampurhat Health District.
5.	Dr. Arita Sen Chatterjee, ACMOH, Asansol.	Asansol Health District.
6.	Dr. Tapan Kumar Khatua, ACMOH, Contai.	Nandigram Health District.
7.	Dr. Tapan Kumar Bapari, Z.L.O. Paschim Medinipur.	Jhargram Health District.

*Sd/- K.K. Bose*  
Joint Secretary

Memo. No. HF/O/MA/935/1(4)/HHM/1H-151/2012

Date: 21.05..2012

Copy forwarded for information and necessary actions to the:

1. Principal Accountant General(A&E), West Bengal, Treasury Buildings, Kolkata-700001..
2. The Accountant General(Audit), West-Bengal, Treasury Buildings, Kolkata-700001.

3. The Accountant General(Local Bodies Audit), West Bengal, C.G.O. Complex, Salt Lake City, Kolkata-700064.
4. Pay and Accounts Officer, Kolkata Pay and Accounts Office, 81/2/2, Phears Lane, Kolkata-700012,

  
Deputy Secretary  
to the Government of West Bengal.

Memo. No. HF/O/MA/935/2(44)/HHM/1H-151/2012

Date: 21.05.2012

Copy forwarded for information and necessary action to the:-

1. Additional Director of Health Services(AA&V), West Bengal.
2. Joint Director of Health Services(PH&CD), West Bengal,
- 3-4. Deputy Director of Health Services(Admn)/(Accounts), West Bengal.
- 5-6. Assistant Director of Health Services(P&E)/(Admn), West Bengal.
- 7-13. CMOH, Burdwan/Bankura/Purba Medinipur/24-Parganas(North)/24-Parganas(South)/Birbhum/Paschim Medinipur.
- 14-20. Treasury Officer, Burdwan/Bankura/Purba Medinipur/24-Parganas(South)/24Parganas(North)/Birbhum/Paschim Medinipur.
- 21-27. District Magistrate, Burdwan/Bankura/Purba Medinipur/24-Parganas(North)/24Parganas(South)/Birbhum/Paschim Medinipur.
- 28-33. Superintendent, Asansol SD Hospital, Burdwan/Bishnupur SD Hospital, Bankura/Rampurhat SD Hospital, Birbhum/Basirhat SD Hospital, North 24-Parganas/Diamond Harbour SD Hospital, South 24-Parganas/Jhargram SD Hospital, Paschim Medinipur.
34. Dr. Himadri Pal, ACMOH, Diamond Harbour.
35. Dr. Asit Pande, ACMOH, Basirhat.
36. Dr. Girish Chandra Bera, Z.L.O., Bankura.
37. Dr. Sovam Dey, Z.L.O. Birbhum.
38. Dr. Arita Sen Chatterjee, ACMOH, Asansol.
39. Dr. Tapan Kumar Khatua, ACMOH, Contai.
40. Dr. Tapan Kumar Bapari, Z.L.O. Paschim Medinipur.
41. BMOH, Nandigram Rural Hospital, Purba Medinipur.
42. PA to Principal Secretary(H), Government of West Bengal.
43. PA to Special Secretary(MA) of this Department.
44. Guard File.

  
Deputy Secretary  
to the Government of West Bengal.

Receipt No : 487754/2017/E-GOVERNANCE



**Government of West Bengal**  
**Department of Health & Family Welfare**  
**Swasthya Bhaban, GN - 29, Sector - V**  
**Salt Lake, Kolkata - 700091**

No. HF/SPSRC/112/2013/384

Dated: 29/09/2014

Notification

In continuation of the previous notification No. HF/SPSRC/112/2013/182 Dated 11<sup>th</sup> September, 2013, the Governor is pleased to order the formation of new 'District Health & family Welfare Samity' in the newly formed seven Health Districts namely Jhargram, Basirhat, Rampurhat, Asansol, Bishnupur, Nandigram & Diamond Harbour.

2. The formation of new DH&FWS will be governed by the modified version of the 'Memorandum of Association' placed at Appendix - I, 'Regulation' placed at Appendix - II and 'Bye-Laws' at appendix - III

By order of the Governor

*(Signature)*  
 29/09/14  
 Principal Secretary to the  
 Govt. of West Bengal



राजस्थान सरकार

निदेशालय चिकित्सा, स्वास्थ्य एवं परिवार कल्याण सेवाएं, राजस्थान, जयपुर

क्रमांक: एफ.10(1)/डीईओ/पीसीटीएस/NIN/2015/75 दिनांक: 13-4-2016

श्री के. बी. अग्रवाल, IAS  
अपर सचिव,  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय,  
निर्माण भवन, नई दिल्ली - 110011

विषय : स्वास्थ्य संस्थाओं के National Identification Number (NIN-TO-HFI) के क्रम में।

महोदय,

उपरोक्त विषयान्तर्गत निवेदन है कि राजस्थान राज्य से स्वास्थ्य संस्थाओं के National Identification Number (NIN-TO-HFI) के इन्द्राज किये जाने हेतु दिनांक 12.04.2016 को श्री सौरभ कुमार, कन्सलटेंट, नीफू, नई दिल्ली से हुई वार्ता अनुसार श्रीमती शकुन्तला चौधरी, राज्य डेमोग्राफर एवं मूल्यांकन अधिकारी को NIN हेतु राज्य का नोडल अधिकारी नामित किया जाता है। श्रीमती शकुन्तला चौधरी, के मोबाईल नम्बर 9928849590 एवं ई-मेल आई.डी. [shakku15july@gmail.com](mailto:shakku15july@gmail.com) व [deocell@yahoo.com](mailto:deocell@yahoo.com) है।

भवदीय,

(जी.वी.के.माथुर)

निदेशक (आरसीएच)

Receipt No : 487754/2017/E-GOVERNANCE

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.0](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2.0)

Subject: NIN-HFI- Rajasthan Nomination

To: ankit\_tripathi11@hotmail.com

Cc: supten@gmail.com

Date: 04/25/16 03:05 PM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;



NIN Rajasthan.pdf (343kB)

Sir,

PFA the nomination from Rajasthan State for NIN - HFI.

Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health &amp; Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011

Tel: 011 – 2306 2263

Mobile: 9582861973



Receipt No : 487754/2017/E-GOVERNANCE

[https://mail.gov.in/iwc\\_static/layout/shell.html?lang=en-US&3.0.1.2.](https://mail.gov.in/iwc_static/layout/shell.html?lang=en-US&3.0.1.2)Subject: **NIN to HFI, Karnataka nomination**

To: ankit\_tripathi11@hotmail.com

Cc: supten@gmail.com

Date: 04/25/16 12:47 PM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;

Karnataka NIN Nodal Officer.pdf (369kB)

Sir,  
PFA the nomination from Karnataka State for NIN - HFI.

Regards  
Amit Kumar  
Assistant Director (eGovernance)  
Ministry of Health & Family Welfare  
Room No. 425C  
Nirman Bhawan  
New Delhi – 110 011  
Tel: 011 – 2306 2263  
Mobile: 9582861973

GOVERNMENT OF KARNATAKA

No. HFW 33 FPE 2016.

Karnataka Government Secretariat,  
Vikas Soudha,  
Bangalore, dated:05-04-2016.FromThe Principal Secretary to Government,  
Health and Family Welfare Department,  
Vikas soudha , BENGALURU.1.To,The Additional Secretary to Government of India,  
Ministry of Health and Family Welfare,  
Nirman Bhavan, New Delhi-110011.*Der Secy Sir,*Sub: National Identification Number to Health  
facilities of India.Ref:- Your Office letter No:Z18015/1/2016-eGOV,  
dated 3-2-2016.

\*\*\*\*

With reference to the above subject and reference cited above, I am directed to inform that Smt. Vinutha Rani B. Demographer, Health and Family Welfare Services, Ananda Rao Circle, Bengaluru-560009, Karnataka is nominated as State Nodal Officer on NIN matters.

Thanking you,

Your faithfully,

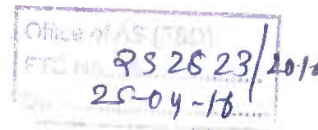
(B.V SRINIVASIAH),

Under Secretary to Government,  
Health and Family Welfare Department.*SRS*
*AD(Plan)*  
*AD(GHI)*

Receipt No : 487754/2017/E-GOVERNANCE

From

The Director Health & Family Welfare,  
Chandigarh Administration.



To

Sr. K.B Agarwal, IAS  
Additional Secretary,  
Govt of India,  
Ministry of Health & Family Welfare,  
Nirman Bhawan, New Delhi.

Memo SA-I/2016/

Dated, Chandigarh the:

5802  
10/3/16

Subject:-


**National Identification Number to Health Facilities of India(NIN-to-HFI)**

Sir,

I am directed to refer to D.O. No. Z.18015/1/2016-eGov dated 3-2-2016 addressed to Home Secretary cum Secretary (Health & Family Welfare) Chandigarh Administration on the subject noted above and to state that Dr. Deepak Bakshi, Medical Officer cum Nodal Officer Computerization of this department is hereby nominated for obtaining NIN Portal Credentials for verification from National Coordinator National Coordination Unit, Centre for Health Informatics , New Delhi

You are therefore, requested to accept the nomination of above officer and send confirmation at the earliest possible.

Yours Faithfully,

  
Director Health & Family Welfare,  
Chandigarh Administration.  
Dated, Chandigarh the:

Endst. No.SA-I-2016/

A copy is forwarded to the following for information and necessary action:-

1. PA to Secretary Health, Chandigarh Administration.
2. The Medical Superintendent, Govt. Multi-Speciality Hospital, Sec.-16, Chd.
3. Dr Deepak Bakshi, Medical Officer cum Nodal Officer (Computerization), GMSH-16, Chandigarh. A copy of .O. No. Z.18015/1/2016-eGov dated 3-2-2016.
4. The Assistant Controller (F&A), Accounts Branch, GMSH, Sec.-16, Chandigarh.
5. MH-II

**For No.-3 only:- T.A. will be paid by the Chandigarh Administration as per his entitiement under the rule.**



सुजाता सौनिक  
प्रधान सचिव  
Sujata Saunik  
Principal Secretary



PS 2803/2016  
25-04-16

महाराष्ट्र शासन  
सार्वजनिक आरोग्य विभाग  
मंत्रालय

कॉम्प्लेक्स बिल्डींग, गोकुल्दास तेजपाल रुग्णालय कंपाऊंड,  
१०वा मजला, मुंबई ४०० ००१  
दुराध्यानी : कार्यालय - ०२२-२२६१७३८८ फॅक्स : २२६१७९९९  
ई-मेल : psec.pubhealth@maharashtra.gov.in  
pspubhealth@gmail.com

GOVERNMENT OF MAHARASHTRA  
Public Health Department  
Mantralaya

Complex Building, Gokuldas Tejpal Hospital Compound,  
10th Floor, Mumbai - 400 001.  
Phone : 022-22617388 Fax : 022-22617999  
Email : psec.pubhealth@maharashtra.gov.in  
pspubhealth@gmail.com

D.O.No.EGV- 2016/CR-07/e-gov,  
Date:-4 March, 2016

**Subject:- National Identification Number to Health Facilities of India (NIN-to-HFI).**

**Ref:- Your letter no.Z-18015/1/2016-e-gov,dated 03/02/2016.**

Dear Sir,

With reference to your above cited letter, I would like to inform you that Public Health Department, Govt. of Maharashtra is taking necessary actions/steps regarding above mentioned subject.

2. Shri Sanjay Patil , superintendent Engineer , IDW, NHM, Public Health Department, Govt. of Maharashtra, nominated as a nodal officer. His office Tel no.022-22717539 & Mobile No. 9422153214

With Regards,

Sincerely,  
(Sujata Saunik) 4/3/16

To,  
K.B.Agarwal,

Additional Secretary,  
Ministry of Health & Family Welfare,  
Government of India,  
Nirman Bhavan,  
New Delhi- 110011.

IS/e-gov

Copy to-

1) Shri Sanjay Patil , superintendent Engineer , IDW, NHM,,Mumbai

D:\Other Matters\National Identification Number to Health Facilities of India CR-07-2016.docx



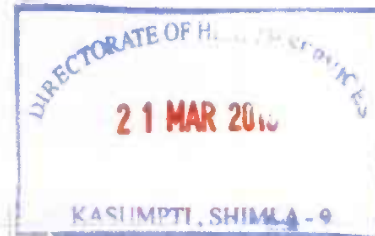
Receipt No : 487754/2017/E-GOVERNANCE

No. HFW-NHM/NIN-HFI/2016 -12076  
National Health Mission  
Himachal Pradesh

~~178-2528~~ 23  
Office of AS /  
No. 252844/2016

To

✓ Sh. K.B Aggarwal, IAS  
Additional Secretary,  
Ministry of Health & Family Welfare  
Government of India,  
Nirman Bhawan, New Delhi-110011  
Dated Shimla the



Sub: National Identification Number to Health Facilities if India (NIN-to-HFI).

Sir,

This is with reference to the letter No. Z-18015/1/2016-eGov dated 3rd February, 2016 on the subject noted above.

In this regard **Mr. Devender Sen, Consultant (MIS)** National Health Mission Himachal Pradesh is hereby nominated as the nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi.

*sample*  
Dy. Mission Director  
National Health Mission  
Himachal Pradesh

Endst. No. As above.

Copy to:

1. Sh. Devender Sen, Consultant(MIS), NHM-(HP) for information & compliance please.

*sample*  
Dy. Mission Director  
National Health Mission  
Himachal Pradesh

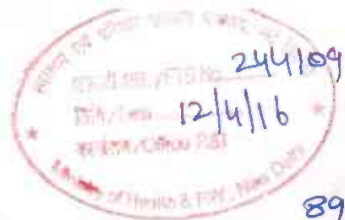
*JS/...*  
*25/4*  
*Director*

*AD/...*





Government of Jammu & Kashmir  
**HEALTH & MEDICAL EDUCATION DEPARTMENT**  
Civil Secretariat – Jammu  
(\*\*\*)



Mission Director,  
National Health Mission,  
J&K, Jammu

No: HD/Plan/52/2016

Dated: -03-2016

**Subject: National Identification Number to Health Facilities of India (NIN-2-HFI)**

Sir,

I am directed to enclose a copy of e-mail letter received from the Ministry of Health & Family Welfare, GOI wherein; the Ministry has initiated a process to generate National Identification Number (NIN) for all Health Facilities of India (HFI). This number will be a random 10-digit unique number within India. MCTS Facility Master has been taken as base for generating the NIN and software developed for the purpose would verify the data base. A Nodal Officer is required to be nominated for obtaining NIN Portal Credentials for verification from National Coordinator Unit for Health Informatics.

Accordingly, you have been nominated Nodal Officer for NIN-2-HFI and requested to approach the Ministry of Health & Family Welfare for the further course of action as per their procedure evolved for the purpose.

Yours faithfully,

*Sir (eHealth)*

Encl-02 Leaves

*M. Sonaprat*  
Joint Director (P&S)

Health & Medical Education Department

**Copy for information to:-**

- ✓ Sh. Jitendra Arora, Director (eHealth), Ministry of Health & Family Welfare, Nirman Bhawan, Room No 307D New Delhi - 110108

Receipt No : 487754/2017/E-GOVERNANCE

Jitendra Arora 30-0

Saubky@gmail.com

②

at@nikita.org





88

**OFFICE OF THE MISSION DIRECTOR  
NATIONAL HEALTH MISSION, MEGHALAYA**

**Directorate of Health Services, Red Hill, Upper New Colony, Health Complex,  
Laitumkhrah, Shillong-793003, Ph-0364-2506460/2506552, Fax: 0364-2506244**

**Email: nrhmmegh@gmail.com**

No: DHS/MCH&FW/HMIS/ /85/10/Pt-3/ 933

Dated: 9.3.2016

From **Jt. Mission Director, NHM**  
Meghalaya, Shillong

To,   
✓ **Shri Jitendra Arora**  
Director (eHealth)  
Ministry of Health & Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi – 110108

Subject: Nomination of Nodal Officer for obtaining NIN Portal Credentials.

Sir,

With reference to the subject cited above, I would to inform you that the State of Meghalaya has nominated **Dr. P Nongrum, Senior Medical & Health Officer cum Nodal Officer HMIS/MCTS, Directorate of Health & Family Welfare (MCH&FW), Government of Meghalaya, Health Complex, Laitumkhrah, Shillong - 793003** for obtaining NIN Credentials to Health Facilities in India. Her phone number is (+91)-9436334953 and Email Id – [nongrumpleasure@yahoo.com](mailto:nongrumpleasure@yahoo.com) & [no.hmis.mctsmegh@gmail.com](mailto:no.hmis.mctsmegh@gmail.com).

Thanking you

Yours faithfully

**Jt. Mission Director, NHM**  
Meghalaya, Shillong

Memo.No. DHS/MCH&FW/HMIS/ /85/10/Pt-3/

Dated:

Copy to: -

1. The Mission Director, NHM, Government of Meghalaya for information.

**Jt. Mission Director, NHM**  
Meghalaya, Shillong

Get every Newborn immunized

\*At birth: BCG, OPV (0 dose) || \*At 1 ½ months: DPT1, OPV1 || \*At 2 ½ months: DPT2, OPV2 || \*At 3 ½ months: DPT3, OPV3 || \*At 9 months: Measles  
Conduct delivery at Govt. Hospital & get Rs.700/- under Janani Suraksha Yojana || Healthy Family, Healthy Village, Healthy Nation

87  
Ashish Sharma <ashish.sharma.css@gmail.com>**Releasing funds to NHSRC for NIN implementation**

1 message

**Ashish Sharma** <ashish.sharma.css@gmail.com>

Mon, Apr 11, 2016 at 10:07 AM

To: director@nihfw.org, "Prof. Supten Sarbadhikari" &lt;supten@gmail.com&gt;

Respected Sir,

Please find enclosed the cost estimates of NHSRC for various activities of NIN implementation and you are requested to do the needful in this regard.

Regards

Ashish Sharma  
ASO (eGov)

---

**4 attachments****work order NHSRC.pdf**  
427K**Cost Estimates.pdf**  
889K**NHSRC letter of acceptance.pdf**  
609K**engagement of NHSRC for NIN implementation new.pdf**  
396K



File No. Z-18015/1/2016-eGov  
Government of India  
Ministry of Health & Family Welfare  
(eGovernance Section)

Nirman Bhawan, New Delhi  
Dated 04<sup>th</sup> April 2016

To,  
Director, NIHF  
Baba Gang Nath Marg,  
Munirka, New Delhi-110067.

Subject: Engagement of NHRSC, New Delhi for facility master data Integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

Sir,

Facility Master Data Integration of MCTS and HMIS Portal is necessary for effective implementation of NIN-2-HFI. NHRSC has been a part of implementation of both the system and knows the technical boundaries which these system need to bridge to exchange the data.

2. In this regard, it is suggested that "National Health Systems Resource Centre" (NHRSC), New Delhi may be engaged for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all health facilities across India (copy enclosed).
3. NHRSC has requested the Ministry for a fund of Rs. 8,01,900/- (Rs. Eight Lakh One thousand Nine Hundred Only) for completion of the aforementioned task. Funds have already been allotted to NHP (CHI), NIHF for various eHealth activities including NIN implementation, It is requested to transfer the required funds of Rs 8,01,900/- to National Health System Resource Centre.


This issue with the approval of competent authority.

Yours faithfully,

  
(Jitendra Arora)  
Director (eGovernance)  
MoHFW

Copy to:-

Prof. S. N. Sarbadhikari, Project Director CHI, NIHF

Please Issue  
REI  
by Speed post  
  
8-4-16

Receipt No : 487754/2017/E-GOVERNANCE



**Dr. Sanjiv Kumar**  
Executive Director  
(T) : 011 - 26108982  
Email: sanjiv.kumar@nhsrcindia.org



85

**National Health Systems Resource Centre**  
Technical Support Institution with  
National Health Mission  
Ministry of Health and Family Welfare,  
Government of India

NHSRC/11-12/ED/01  
Dated: 22<sup>nd</sup> March, 2016

**Subject: Re: Engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.**

Dear Shri Jitendra Arora,

Please refer to your letter (Z-18015/1/2016-eGov(Pt1)) dated 18<sup>th</sup> March, 2016; I would like to inform you that NHSRC would be happy to take up the assignment on "Facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India". It is part of the NHSRC work plan for the year 2016-17.

The nature of work would require placing four consultants for about two month's duration to accomplish this particular task. As per NHSRC norms four consultants (2 Public Health Consultants; one IT Architect- Consultant and one Senior Functional Health IT expert) would be engaged as short term consultants. The total cost for this assignment would be intimated to you in due course. For any queries you may please keep in touch with Dr. Amit Mishra, Senior Consultant -HMIS (email- [dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com) M-9910011595).

Dr. Sanjiv Kumar

To,  
Shri Jitendra Arora  
Director, MoHFW  
New Delhi

Copy to:

PPS, JP (P)  
MoHFW, Nirman Bhawan,  
New Delhi

AD(PHFW)  
JH  
28/3/16

NIHFW Campus, Baba Gang Nath Marg, Munirka, New Delhi - 110067

Receipt No : 487754/2017/E-GOVERNANCE



# National Health Systems Resource Centre

Technical Support Institution with National Rural Health Mission  
Ministry of Health & Family Welfare Government of India



March 31, 2016

To,

Shri Jitendra Arora  
Director (E-Health)  
Ministry of Health & Family Welfare  
Government of India  
Nirman Bhawan  
New Delhi

**Subject: RE: Engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.**

Dear Sir,

With reference to your letter vide no. Z-18015/1/2016-eGov(Pt1) dated 18<sup>th</sup> March 2016, we would like to let you know that this assignment requires two months of work by 4 people (2 Public Health Consultants; 1 IT Architect- Consultant and 1 Senior Functional Health IT expert). The three Consultants and Functional Health IT Consultant can be engaged as short term consultants. As per NHSRC norms, total cost for the assignment would be Rs. 8,01,900/- (Rs Eight Lakh one thousand nine hundred only). The detailed breakup is given below:

S.N.	Human Resource Required	Unit	Unit cost	Working Days	Total Amount
1	IT Consultant	1	3000	45	1,35,000
2	Public Health Consultant	2	3000	45	2,70,000
3	Functional Health IT Consultant	1	7200	45	3,24,000
				Sub total	7,29,000
4	Overhead @10%				72,900
				Grand Total	8,01,900
	Rs eight lakhs one thousand nine hundred only				

It is to inform that funds are provided to NHSRC by MoHFW in Grant-in-aid mode.

Your are requested to approve the above estimated cost and make necessary arrangements for release of fund at the earliest as NHSRC is getting into contract with the technical support agency to execute the task.

Thanking you.

*AD/Phu v)*

*4/4/16*

Yours faithfully,

(Dr. Uddipan Dutta)  
Principle Administrative Officer

Address: National Health Systems Resource Centre, NIHFWS Campus, Baba Gangnath Marg, Munirka, New Delhi 110067  
Phones: 011-26108982/83/84/92/93, Fax: +91-11-26108994 e-mail: nhsr.india@gmail.com Website: www.nhsrindia.org



Receipt No : 487754/2017/E-GOVERNANCE



Govt. of National Capital Territory of Delhi  
Health and Family Welfare Department  
Delhi State Health Mission  
6<sup>th</sup> Floor, A&B Wing, Vikas Bhawan-II  
Civil lines, Delhi-110054



227531/14  
18-03-16

83

File no. DGHS-02/14/2016-Addl Dir HOO\_DHS-DIRGE (DGHS) / 1929/2016 Date: 14.03.2016

To  
Mr K B Agarwal (IAS)  
Additional Secretary  
Ministry of Health & Family Welfare  
Government of India  
Nirman Bhavan  
New Delhi 110011

Subject: Nomination of Nodal Officer for National Identification Number to Health Facilities

Sir,

This is with reference to your letter no. Z-18015/1/2016-eGov dated 03.02.2016 regarding National Identification Number to Health Facilities of India (NIN to HFI), Ms Jaishree Dash the State MIS Expert, Delhi State Health Mission is nominated as Nodal Officer( Email ID [dshmhmis@gmail.com](mailto:dshmhmis@gmail.com), phone no.01123812904) for Delhi State for obtaining NIN Portal Credentials from National Coordinator, National Coordination Unit, Centre for Informatics, New Delhi.

Dr. Monika Rana  
Additional Secretary (M) & SPO  
Delhi State Health Mission

Copy to:

1. Dr Sunil Bhatnagar, Additional Director, DGHS.
2. Ms Jaishree Dash, State MIS Expert, DSHM, Vikas Bhawan II.
3. PA to Director General, Directorate General of Health Services.
4. PA to Mission Director, DSHM.
5. PS to Secretary (H&FW), Delhi Secretariat.

Signature valid

Digitally signed by MONIKA  
RANA  
Date: 2016.03.14 18:44:30 IST  
Reason: Approved



JS (e-gov)  
Dir (e-gov)  
25/6  
18/3/16

Receipt No : 487754/2017/E-GOVERNANCE



**Sowjanya, I.A.S.,**  
Mission Director  
National Health Mission

Office of the Mission Director  
290347/16  
23-03-16.



**Directorate of Health & Family  
Welfare Services**

New Building, First Floor,  
Ananda Rao Circle, Bangalore - 560009.

Tel : 080-2237 3587

Fax : 080-2234 0164

E-mail : mdnrhmkar@gmail.com

DO.No/FWS/60/D&E/2015-16

Date: 03.03.2016

Respected Sir,

Sub: Nominating officer for providing user credentials for NIN  
to HFI portal.

Ref: D.O. letter No. Z-18015/1/2016-eGov Dt : 3<sup>rd</sup> Feb 2016

\* \_ \* \_ \* \_ \*

With Reference to the above referred D.O. letter the following officer has been made as nodal officer for obtaining user credentials for National Identification Number to health Facilities of India (NIN-2-HFI) application portal from Karnataka.

Name of the Officer : Smt. Vinutha Rani B

Designation : State Demographer,

Office : Directorate of Health & FWS,  
Anand Rao Circle, Bangalore – 560 040.

With

*warm regards,*

Yours sincerely,

*JS(e-gov)*  
*23/3/16*

*d. p. 23/3/16*

*(Sowjanya)*

Sri. K B Agarwal, IAS  
Additional Secretary,  
Ministry of Health and Family Welfare,  
Government of India,  
Nirman Bhavan,  
New Delhi - 110011

*dnr(e-gov)*





Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**Fwd: Providing diet related information to National Health Portal**

1 message

Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Thu, Mar 24, 2016 at 3:57 PM

To: ankit\_tripathi11 &lt;ankit\_tripathi11@hotmail.com&gt;, Amit Kumar &lt;amitkumariss34@gmail.com&gt;

----- Forwarded message -----

From: "DIRECTOR NIN" &lt;dirnin\_hyd@yahoo.co.in&gt;

Date: 24 Mar 2016 10:40

Subject: Providing diet related information to National Health Portal

To: "dir.ehealth@gmail.com" &lt;dir.ehealth@gmail.com&gt;, "supten@gmail.com" &lt;supten@gmail.com&gt;

Cc: "P. Udaykumar" &lt;putchaaudaykumar@yahoo.com&gt;

From:

T.Longvah

Director I/c

National Institute of Nutrition

ICMR, Tarnaka, Hyderabad - 500 007

Ph. No. 040-27018083 Fax No.040-27019074

To

Sri. Jitendra Arora

Director

Ministry of Health &amp; Family Welfare

Govt. of India

New Delhi

Dear Sir

This has reference to your letter dated 10th March 2016 requesting us to nominate a Nodal Officer from NIN for providing diet related information to National Health Portal (NHP). In this connection, I am nominating Dr. P.Uday Kumar Scientist-F, as Nodal Officer. I am giving below his contact details :

Dr. P. Uday Kumar

Scientist-F

Email : putchaaudaykumar@yahoo.com

Telephone No. 040-27197223

Regards

T.Longvah

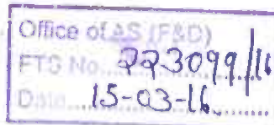
संदीप कुमार, भा.प्र.से.  
विकास आयुक्त

**SANDEEP KUMAR, I.A.S.**  
**DEVELOPMENT COMMISSIONER**

Secretary (Health).



सत्यमेव जयते



संघ प्रदेश दमण एवं दीव और  
दादरा एवं नगर हवेली,  
सचिवालय, सिलवासा-३९६ २३०.

Union Territories of Daman & Diu  
and Dadra & Nagar Haveli,  
Secretariat, Silvassa - 396 230.

Tel. : 0260 - 2632126

Fax : 0260 - 2645466

Email : devcom-dd@nic.in

DO No. DMHS/Plan/80/2016 /1378  
Dated: 8/03/2016.

Dear Sir,

I am in receipt of your Letter No. Z-18015/1/2016-eGov dated 3<sup>rd</sup> Feb. 2016 regarding "National Identification Number to Health Facilities of India".

2. The UT of Dadra and Nagar Haveli is nominating Mr. Kirit Parmar, State Data Manager as Nodal Officer for obtaining NIN portal credentials for each Health Facility of Dadra & Nagar Haveli.

With Regards,

Yours Sincerely,  
  
(Sandeep Kumar).

Shri K.B.Agarwal,  
Additional Secretary,  
Ministry of Health & Family Welfare,  
Nirman Bhawan,  
New Delhi 110 108.

JS(e-gov) 15/3  
Dr(e-gov)

14/3/16

17/3/16

scan & email to  
AD, CHI  
16/3/16

Receipt No : 487754/2017/E-GOVERNANCE

पंजीकृत पत्र पावती द्वारा  
By R.P.A.D.

डाक विभाग  
DEPARTMENT OF POSTS-INDIA  
ACKNOWLEDGEMENT

भारतीय डाक  
India Post

पत्र/परसल  
Letter/Parcel

तारीख/Dated 8/3/16 का/of

से  
From R.P. Agarwal,  
Additional Secretary,  
M.F.W., National Health  
New Delhi-110108

को/On

तारीख-मोहर  
Date of delivery

हस्ताक्षर और नाम / Signature and Name

1. R. Agarwal,  
National Secretary,  
Ministry of Health & Family Welfare,  
New Delhi-110108

RG728569405IN

प्रेषक लिपिक/Despatch Clerk  
विक्रिस्ता एवं स्वास्थ्य सेवाएं  
Medical & Health Services  
दक्ष एवं बजट हवेली  
Dadra & Nagar Haveli  
सिलवासा/Silvassa

Receipt No : 487754/2017/E-GOVERNANCE





Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**NHSRC work order**

2 messages

Amit Kumar <amitkumariss34@gmail.com>  
To: dr.amitmishra@gmail.com  
Cc: Jitendra Arora <dir.ehealth@gmail.com>

Sat, Mar 19, 2016 at 1:07 PM

Sir,

Please find attached the work order from MoHFW regarding Engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

*Regards**Amit Kumar**Assistant Director (eGovernance)**Ministry of Health & Family Welfare**Room No. 425C**Nirman Bhawan**New Delhi - 110 011**Tel: 011 - 2306 2263**Mobile: 9582861973* **work order NHSRC.pdf**  
427K

Amit Mishra <dr.amitmishra@gmail.com>  
To: Jitendra Arora <dir.ehealth@gmail.com>  
Cc: Amit Kumar <amitkumariss34@gmail.com>, "Dr. Satish Kumar" <satish.kumar@nhsrindia.org>

Tue, Mar 22, 2016 at 4:09 PM

Dear Sir,

Please find enclosed NHSRC letter regarding acceptance of work order for HMIS & MCTS master facility data mapping exercise.

Regards,  
Amit Mishra

Dr. Amit Mishra

Receipt No : 487754/2017/E-GOVERNANCE



Sr. Consultant  
National Health Systems Resource Centre,  
NIHFW Campus, Baba Ganganath Marg I Munirka, New Delhi-110067  
Mobile: +91 9910011595 I Ph : 011 26108982,83,84, I Fax : 26108994.  
E-mail: dr.amitmishra@gmail.com I Website : www.nhsrindia.org

[Quoted text hidden]



---

**NHSRC letter.pdf**  
609K





Dr. Sanjiv Kumar  
Executive Director  
(T) : 011 - 26108982  
Email: sanjiv.kumar@nhsrcindia.org



National Health Systems Resource Centre  
Technical Support Institution with  
National Health Mission  
Ministry of Health and Family Welfare,  
Government of India

NHSRC/11-12/132/01  
Dated: 22<sup>nd</sup> March, 2016

Subject: Re: Engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

Dear Shri Jitendra Arora,

Please refer to your letter (Z-18015/1/2016-eGov(Pt1)) dated 18<sup>th</sup> March, 2016; I would like to inform you that NHSRC would be happy to take up the assignment on "Facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India". It is part of the NHSRC work plan for the year 2016-17.

The nature of work would require placing four consultants for about two month's duration to accomplish this particular task. As per NHSRC norms four consultants (2 Public Health Consultants; one IT Architect- Consultant and one Senior Functional Health IT expert) would be engaged as short term consultants. The total cost for this assignment would be intimated to you in due course. For any queries you may please keep in touch with Dr. Amit Mishra, Senior Consultant -HMIS (email- [dr.amitmishra@gmail.com](mailto:dr.amitmishra@gmail.com) M-9910011595).

*Sanjiv Kumar*

Dr. Sanjiv Kumar

To,

Shri Jitendra Arora  
Director, MoHFW  
New Delhi

Copy to:

PPS, JP (P)  
MoHFW, Nirman Bhawan,  
New Delhi

NIHFW Campus, Baba Gang Nath Marg, Munirka, New Delhi - 110067

Scanned by CamScanner



**JITENDRA ARORA**

Director

Tel. : 011-23062317

E-mail : dir.ehealth@gmail.com



सत्यमेव जयते

भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
डी-307, निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare  
307-D, Nirman Bhavan, New Delhi-110011

Z-18015/1/2016-eGov(Pt1)

Dated: 18<sup>th</sup> March, 2016

To,

Dr. Sanjiv Kumar  
Executive Director  
NHSRC  
New Delhi

**Subject: Engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.**

Sir,

This is regarding engagement of NHSRC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.

2. It is informed that MoHFW has agreed to engage NHSRC, New Delhi for facility master data integration of **MCTS & HMIS Portal**. The scope of work includes following:

- a) Mapping of HMIS and MCTS facility masters with NIN
- b) Identifying mismatches/ duplicates and suggest standard process of verification.
- c) Provide list of all facilities of MCTS (including NIN) along with the attributes of HMIS where they map
- d) Develop standard definitions for attributes of NIN
- e) Suggest a roadmap for updation of NIN data-base

3. You're requested to kindly confirm the acceptance of the work latest by 23<sup>rd</sup> March, 2016. The relevant finance for the work would be issued to the NHSRC.

4. This issues with the approval of the competent authority.

Yours Sincerely,

(Jitendra Arora)

Copy to,

Dr. Amit Mishra, Sr. Consultant, NHSRC

**Healthy Village, Healthy Nation**

बेटी बचाओ, बेटी पढ़ाओ  
Talking about AIDS is taking care of each other

Gmail - Re: HMIS-MCTS Facility- List Mapping Exercise

Page 1 of 3



Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

(73)

**Re: HMIS-MCTS Facility- List Mapping Exercise****Amit Mishra** <dr.amitmishra@gmail.com>

Thu, Mar 17, 2016 at 2:34 PM

To: ANKIT TRIPATHI &lt;ankit\_tripathi11@hotmail.com&gt;

Cc: Jitendra Arora MoHFW &lt;dir.ehealth@gmail.com&gt;, ASFood and Drug MoHFW &lt;asfnd.kb@gmail.com&gt;, "Dr. Satish Kumar" &lt;satish.kumar@nhsrcindia.org&gt;, Sanjeev Kumar ED NHSRC &lt;sanjiv.kumar@nhsrcindia.org&gt;

Dear Ankit,

Please refer to our discussion today. I would like to let you know that NHSRC is better positioned to do this task since we have closely worked with the both HMIS and MCTS since its inception, also as part of MDDS work we have conducted technical assessment of both the system for integration. The report of the study is part of the MDDS report- see appendices of the report. The NHSRC has also been part of the implementation of both these systems and knows the technical boundaries which these systems need to bridge to be able to exchange data. Last - NHSRC was the first organization to make a detailed recommendation on Facility Master List (now named as NIN)- the entire MFL structure is part of MDDS recommendation.

With respect to the deliverable- I suggest you to include followings-

1. Mapping of HMIS and MCTS facility masters with NIN.
2. Identifying mismatches and duplicates and suggest standard process of verification.
3. Provide list of all facilities of MCTS (including NIN) along with the attributes of HMIS where they map.
4. Develop standard definitions for attributes of NIN.
5. Suggest a roadmap for updation of NIN data-base by users.

As discussed earlier also this task will require 4 constant for two months period. Two consultants would come from health IT background and 2 from public health background.

The approximate cost of this work as per NHSRC rates would be around 8 Lakh- this is very rough estimate and I would give you exact figures after we get a letter from your side. We would require financial support as we are tight on budget front right now.

We would like to start this work from 1st April and would take two months time to finish this task.

Hope this is fine with you.

Warm regards,  
Amit Mishra

Dr. Amit Mishra

Sr. Consultant  
National Health Systems Resource Centre,  
NIHFW Campus, Baba Ganganath Marg I Munirka, New Delhi-110067  
Mobile: +91 9910011595 I Ph : 011 26108982,83,84, I Fax : 26108994.  
E-mail: dr.amitmishra@gmail.com I Website : www.nhsrcindia.org

AD/ewu)  
Put on file  
Jhon

On Wed, Mar 16, 2016 at 6:17 PM, ANKIT TRIPATHI <ankit\_tripathi11@hotmail.com> wrote:

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=1...> 3/19/2016

Gmail - Re: HMIS-MCTS Facility- List Mapping Exercise

Page 2 of 3

(74)

Dear Amit,

Can we meet tomorrow to finalise the mapping exercise at Director (eGov) office, Nirman Bhavan ?

Best regards,

Ankit Tripathi

Additional Director

Centre for Health Informatics, National Health Portal,

NIHFW, Ministry of Health and Family Welfare, New Delhi-110067

Phone: +91-11-26165959, 2616 6441, 2618 8485, 2610 7773 (Ext.- 264)

Fax: +91-11-26101623

Mobile: +91-7838363525

Email: ankit@nhp.gov.in at@nihfw.org, ankit\_tripathi11@hotmail.com

From: dr.amitmishra@gmail.com

Date: Wed, 16 Mar 2016 13:39:16 +0530

Subject: HMIS-MCTS Facility- List Mapping Exercise

To: dir.ehealth@gmail.com

CC: asfnd.kb@gmail.com; sunil.bhushan@gov.in; suparna@nic.in; chandrasens@deloitte.com; ankit\_tripathi11@hotmail.com; satish.kumar@nhsrcindia.org; sanjiv.kumar@nhsrcindia.org; deepthi.srivastava@nic.in; prayasadati@gmail.com

Dear Sir,

I have gone in details with facility records from both MCTS and HMIS for West Bengal. This is not as simple as it may seem. Data need to be sanitized. There are issues beyond computer programming:

1. Computer programming may not help when it encounters different spellings e.g. Maldah and Malda or keyword missing e.g. 'SC' attached with facility name in one facility list (MCTS) and not in the other list (HMIS).
2. In addition the way name of the facility is written is also a problem- e.g. Assannagar SC in MCTS sheet but in HMIS sheet it is named as AssanNagar.
3. There are multiple facilities with similar name under different districts/ blocks- e.g. MCTS has a Milki North East SC in Maldah, Milki South East SC in Maldah and a Milki in Hooghly. Whereas HMIS has Milki North East in Malda, Milki South East in Malda and Milki in Hooghly.

These needs to be verified manually and separately and there is a larger consensus required on how do we write name of a facility in the NIN.

The initial task that was assigned to me was to develop concept note and standard processes for data entry and updation in NIN system along with development of standard functional system requirements- which I submitted on 28th December 2015 (also attached with this mail). This issue was **Addressed** in those documents- however unfortunately these were never used for discussion; consensus and approval.

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=1...> 3/19/2016

Page: 2/4

Nodal Officers  
NRC/RRC/Medical College  
(As per list attached)

To

(Jitendra Arora)

Yours Sincerely,

Encl: As above.

up and successfully implementing Tele-evidence centre for guidance and Technical support.

5. You are also requested to pursue the above matter with the courts in your state for the interlinking with them and may consult PGIMER, Chandigarh, a pioneer institution in setting

Gmail - Re: HMIS-MCTS Facility- List Mapping Exercise

The current work requires to write programming logic but a large part of the work is manual sanitization of data. In addition consensus and approval on standard definitions would be required to manage master facility data-base. If this is not addressed we may not be able to claim uniqueness of the data-base. My own estimation of the task is- 4 people (2 IT and 2 Public Health Professionals) to work for 2 months to finish current task of mapping HMIS and MCTS Facility Masters.

It is important that this work is completed following standard processes so that it is over on time with clarity - in terms of definitions and the processes followed.

Hope this helps. If you agree to this we can take necessary approvals and start working on this assignment. Please feel free to contact if any clarifications are required.

Warm Regards,

Dr. Amit Mishra

Sr. Consultant  
National Health Systems Resource Centre,  
NIHFW Campus, Baba Ganganath Marg l Munirka, New Delhi-110067  
Mobile: +91 9910011595 l Ph : 011 26108982,83,84, l Fax : 26108994.  
E-mail: dr.amitmishra@gmail.com l Website : www.nhsrindia.org

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=1...> 3/19/2016



*5112 SHRI JAGAT PRAKASH NADDA UNION MINISTER FOR HEALTH AND FAMILY WELFARE	
Yes	(a) whether Government proposes to introduction of telemedicine services.
A Centrally Sponsored Scheme (CSS) amounting to Rs.103.09 Crores has been approved for establishment of National Medical College Network (NMCN), wherein 41 Govt. Medical Colleges are being networked in the first phase riding over National Knowledge Network – high speed bandwidth connectivity with the purpose of e-Education and e-Higher Education delivery.	(b) if so, the details thereof and the aims and objectives of the scheme along with the funds allocated for the scheme;
Yes	(c) whether the Government is aware that the development of telemedicine services requires customised programmes;
MoHFW is in process of formalizing the Standard Operating Procedures (SOPs) for customized treatment programmes.	(d) if so, the details thereof; and
No	(e) whether the aforesaid scheme is likely to be aligned with the Jan Aushadhi Scheme so as to ensure convergence between them and if so, the details thereof;

Lok Sabha Question No. 5112  
Dated: 04.03.2016

Draft Reply

Receipt No : 487754/2017/E-GOVERNANCE



Govt. of National Capital Territory of Delhi  
Health and Family Welfare Department  
Delhi State Health Mission  
6<sup>th</sup> Floor, A&B Wing, Vikas Bhawan-II  
Civil lines, Delhi-110054



(72)



File no. DGHS-02/14/2016-Addl Dir HOO\_DHS-DIRGE (DGHS) / 1929/2016 Date: 14.03.2016

To

Mr K B Agarwal (IAS)  
Additional Secretary  
Ministry of Health & Family Welfare  
Government of India  
Nirman Bhavan  
New Delhi 110011

**Subject: Nomination of Nodal Officer for National Identification Number to Health Facilities**

Sir,

This is with reference to your letter no. Z-18015/1/2016-eGov dated 03.02.2016 regarding National Identification Number to Health Facilities of India (NIN to HFI), Ms Jaishree Dash the State MIS Expert, Delhi State Health Mission is nominated as Nodal Officer (Email ID [dshmhmis@gmail.com](mailto:dshmhmis@gmail.com), phone no.01123812904) for Delhi State for obtaining NIN Portal Credentials from National Coordinator, National Coordination Unit, Centre for Informatics, New Delhi.

Dr. Monika Rana  
Additional Secretary (M) & SPO  
Delhi State Health Mission

Copy to:

1. Dr Sunil Bhatnagar, Additional Director, DGHS.
2. Ms Jaishree Dash, State MIS Expert, DSHM, Vikas Bhavan II.
3. PA to Director General, Directorate General of Health Services.
4. PA to Mission Director, DSHM.
5. PS to Secretary (H&FW), Delhi Secretariat.

Signature valid

Digitally signed by MONIKA  
RANA  
Date: 2016.03.14 13:44:30 IST  
Reason: Approved

JS (e-gov)  
Dir (e-gov) -0.6  
US (e-gov)  
18/3/16  
18/3/16  
AD (e-gov)





71

<b>Title</b>	Proposal for adoption of Global Location Number (GLN) as National Identification Number(NIN) for Hospital Identification
<b>Submitted To</b>	Ministry of Health and Family Welfare (MoHFW), e-Governance Division
<b>Submitted By</b>	GS1 India 330, August Kranti Bhawan, Bhikaji Cama Place New Delhi -110066
<b>Date of Submission</b>	16-Feb-2016

Ad/eGov)  
81 file NIN  
9/3/16

**GS1 INDIA**

330, August Kranti Bhawan, Bhikaji Cama Place, New Delhi-110066



## Contents

About GS1 India .....	2
GS1 Standards in Healthcare .....	3
Background.....	4
Unique Identification of Hospitals .....	5
Registry for Government Hospitals .....	6
ROHINI (Registry of Hospitals in Network of Insurance).....	6
Proposed Architecture adopting GLN as National Identification Number .....	7
Benefits to the Industry .....	8
Scope of Work.....	8
Goals .....	8
Objectives.....	9
Features and Functionalities .....	9
1. Allocation of Unique Id's(GLN) for the Hospitals .....	9
2. Hospital Registry(Portal) with detailed Hospital Information .....	10
3. Add, Edit and Validate Hospital Records .....	10
4. Geographical Coordinates .....	12
5. Lookup and Search of the Hospital Records .....	12
6. Notifications and Alerts .....	13
7. Reports.....	13
8. Interoperability with Global Registries .....	13
9. Help Desk .....	13
Technology Management.....	14
Roles and Responsibility .....	14
Deliverables .....	15
Data Quality .....	15
Engagement Model .....	16
Commercials .....	16



(69)

## About GS1 India

GS1 India is promoted by the Ministry of Commerce (Govt. of India) and Indian Industry to spread awareness and provide guidance on adoption of global standards by Indian Industry for the benefit of consumers, Industry, Government and is registered as a Society under the Registrar of Societies.

GS1 India is a joint industry initiative setup in 1996 and Board of Management includes representatives from Government bodies, industry as well as institutions:

- Ministry of Commerce and Industry, Government of India
- CII (Confederation of Indian Industry)
- FICCI (Federation of Indian Chambers of Commerce and Industry)
- BIS (Bureau of Indian Standards)
- Spices Board
- APEDA (Agricultural & Processed Food products Export Development Authority)
- ASSOCHAM (Associated Chambers of Commerce and Industry of India)
- IMC (Indian Merchants' Chamber)
- FIEO (Federation of Indian Export Organisations)
- IIP (Indian Institute of Packaging)

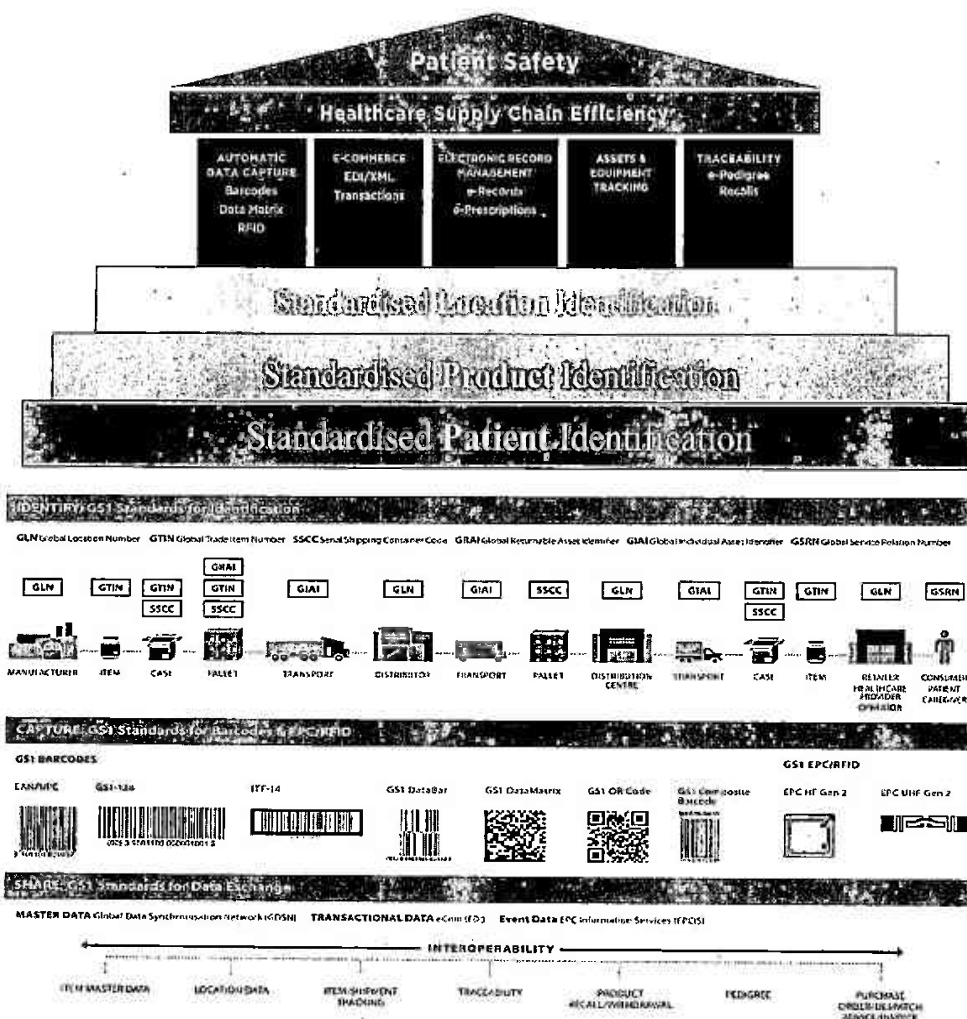
GS1 is a neutral, not-for-profit global standards body that facilitates collaboration amongst trading partners and technology providers through the use of standards. Headquartered at Brussels, GS1 oversees a global network of over 110 GS1 member organisations serving over 150 countries for the past 40 years. GS1 India is one such member organisation affiliated to GS1 Global Office.

62



## GS1 Standards in Healthcare

The GS1 System of Standards provides the comprehensive framework that ensures interoperability between healthcare stakeholders like Manufacturers, Distributors, Hospitals, Retailers and Regulators etc. Product traceability, anti-counterfeit and medication authentication, product recalls, inventory management, eProcurement, bedside scanning and use of Electronic Health Records (EHR) - many business processes benefit from the visibility GS1 Standards provide. Visibility can provide traceability for medication or medical devices along the supply chain all the way to the patient in hospital



16-Feb-2016

Version 1.0

3



67

## Background

The India Healthcare system is one of the largest and most complex sector. The healthcare system in India caters to a diverse population of 1.25 billion across a wide range of geographic and socioeconomic settings. Healthcare services are provided by a vast and complex network of public and private healthcare providers ranging from primary health care providers to specialty, super specialty, large trust or corporate healthcare facilities in both private and public sectors.

One of the major challenge with the existing healthcare systems or health information systems is their inability to exchange / interoperate information's related to the patient care between themselves. This inability is primarily because of the lack adoption of standards in uniquely and universally identifying healthcare facilities, drugs, patients etc. and sharing of information in a standardized and structured manner.

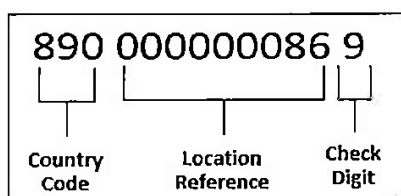
To enable interoperability between healthcare facilities, one of the critical aspect is unique and universal identification of the healthcare facilities / hospitals, a national registry of hospitals which can be utilized by different stakeholders associated with healthcare services both in public and private sectors.



## Unique Identification of Hospitals

GS1 India is recommending adoption of GLN (global location number) as national identification number for unique and universal hospital identification based on GS1 global standards.

Each Hospital will be allocated a globally unique 13 digit code, which will enable universal and unique identification of the Hospitals



Global Location Number (GLN) consists of country code, location reference and a check digit. The 13<sup>th</sup> digit (last digit) of the number is called the check digit which makes sure that the number is correctly composed. The check digit is calculated based on the preceding digits based on modulo 10 algorithm.

GLN's are used extensively worldwide for unique identification of legal entities, locations etc. and are unambiguous, non-proprietary codes which can be easily mapped with internal codes.

GLN is an unambiguous unique number used worldwide that will act as a key to retrieve the information associated with the Hospital. This lack of significance means that GLNs can be used to identify physical locations at any level of granularity from the main location down to individual specific locations within each main location.

GLNs can also be used to identify organisations and functions from legal entities, such as Trusts and companies, down to the smallest sub departmental role.



2

## Registry for Government Hospitals

A registry of government hospitals using GLN's as national identification number for unique identification, provide visibility of the hospitals worldwide and also to various Govt. Departments, Regulators and public at large. This would be very useful in accessing information related to various treatments/facilities/specialties offered by each hospital using the GLN as the pointer.

GS1 has developed standards which facilitate communication between such national registries worldwide using GLN as the primary search key. Each hospital/ stakeholder information comprising its contact details etc. shall be uploaded into the national registry by the hospitals which would enable easy web-based access and uniqueness of the GLN would be guaranteed by GS1 worldwide thus promoting medical tourism. Similar registries has been setup by organisations like NHS, UK and NEHTA, Australia makes use of GLN as the key to uniquely identify the hospitals

The proposed registry would provide facility for uploading any changes/modifications in the reference data linked to its GLN directly by each hospital at any time, thus enabling access to updated data at all times.

## ROHINI (Registry of Hospitals in Network of Insurance)

GS1 India has setup a similar registry, ROHINI (<https://rohini.iib.gov.in>) in association with Insurance Information Bureau (IIB), under IRDA for all hospitals that comes under the insurance domain. The registry comprises 32000 plus hospitals uniquely identified using GLN. The same model can be adopted at a national level for hospitals in private sector.

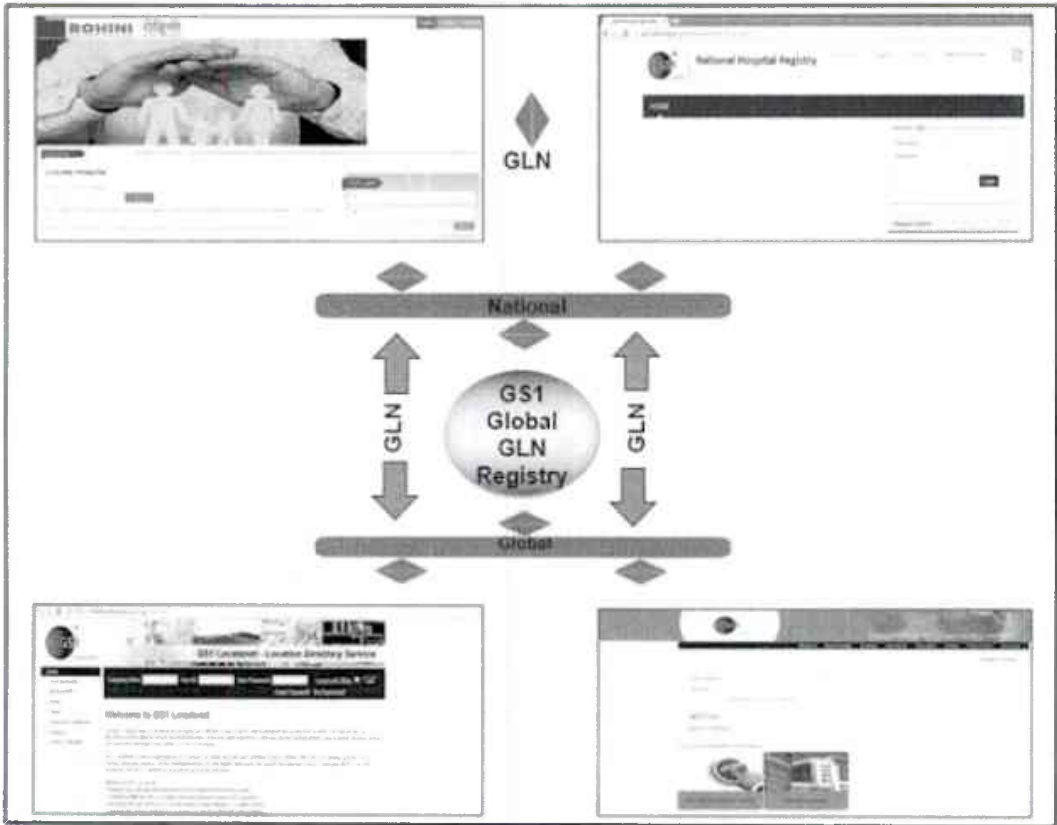
A separate registry can be setup for hospitals in the government sector as mentioned above and can be made interoperable with ROHINI as well as with similar registries worldwide using GLN as a key to retrieve / query / interoperate the information related to the hospitals.



89



Proposed Architecture adopting GLN as National Identification Number





(62)

### Benefits to the Industry

- Facilitate electronic exchange of medical records between hospitals and other healthcare stakeholders
- Single source of healthcare information to all stakeholders associated with healthcare sector
- Genuinity and visibility of the hospitals and healthcare facilities across the country and worldwide
- National, region and state level analytical reporting on healthcare aspects
- Unique master to all web portals or applications in healthcare and hence provides authentication
- International visibility for hospitals interoperability with national and international registries
- Facilitates Medical Tourism

### Scope of Work

Manage and maintain a registry for government hospitals comprising comprehensive master data of the Hospitals and Healthcare facilities in the country. Each Hospital will be uniquely identified by Global Location Number (GLN), a globally recognized and widely used standard for uniquely identifying the locations or legal entities.

### Goals

- Setup, manage and maintain a Registry comprising a comprehensive list of hospitals, healthcare facilities and associated information in the government sector.
- Uniquely identify each hospital using the Global Location Number(GLN), the most widely used GS1 standard key for uniquely and unambiguously identifying the locations
- Dissemination of the information gathered for potential use among regulators, ministry etc. electronically.
- Interoperability with similar registries across the globe



## Objectives

- Develop the registry
- Allocation of unique Id's(GLN) to each Hospital from global GLN registry
- Migrate the existing hospital records into the registry
- Setup process to grant access to the individual hospitals for data validation and confirmation for the existing and new ones
- System level validation for data quality, de-duplication and incomplete records
- Setup process through workflow to ensure data quality
- Enable interoperability with global registries

## Features and Functionalities

National Hospital Registry will have the following features:

1. Allocation of Unique Id's(GLN) for the Hospitals
2. National Hospital Registry (Portal) with detailed Hospital Information
3. Add, Edit and Validate Hospital records
4. Geographical Coordinates
5. Lookup and Search of the Hospital records
6. Notifications and Alerts
7. Reports
8. Interoperability with Global Registries
9. Helpdesk

### 1. Allocation of Unique Id's(GLN) for the Hospitals

Each Hospital will be allocated a unique 13 digit code, Global Location Number or GLN by the registry, which will enable universal and unique identification of the Hospitals



61

## 2. Hospital Registry(Portal) with detailed Hospital Information

Hospital Registry will perform as a central repository for all the hospitals in the country. It facilitates uniquely identifying each Hospital with a globally unique Id and will have the capability of capturing address, contact information, location coordinates and multiple additional information (Specialties, Services, and Doctors Panel etc) associated with each hospital.

The actual data attributes that needs to be captured for each Hospital needs to be discussed and finalized as part of the detailed scoping process

## 3. Add, Edit and Validate Hospital Records

### **ADD**

The registry will have the capability for bulk upload of the Hospital records (MS Excel Format), direct interface with other applications through API or Webservice. The record can be added individually or one by one by logging into the registry and using the ADD GLN or Hospital Records screen/GUI. Specific business rules will be built in to validate the data to ensure the quality. Only authorized users will be allowed

The Hospital records that are part of Version 1.0 will be migrated to the registry through a bulk upload process. The data validation and de-duplication will takes place through multiple steps:

- Manual sanity check
- De-duplication and validation will be done as part of the upload process through listing out records with identical text match for address fields, identical phone numbers, identical Location type etc by using any phonetic or soundex algorithms.
- Such exceptional records will further routed through maker checker process for revalidating the information by coordinating with the authorised contact person at Hospitals
- The corrected and uploaded records can be further be extended to the Hospitals for validating the information already in the register
- All validated records by the authorised person at Hospitals will be flagged separately
- Regular reminders can be send to the hospitals for validating the records that are uploaded in the registry



- Any changes done by the registry can be further routed through a maker checker process.
- Separate MIS reports can be generated for those records that are not validated by the owners and can be reached out separately for confirmation by various communication modes like emails, phones etc.

**EDIT**

Both Admin and User can edit the records that are added. Any changes done can be routed through a workflow process to ensure the quality. Only authorised users will be allowed to edit the records. Access rights for each user will be defined through the Admin panel.

**VALIDATE**

Every Hospital data added needs to be validated by the authorised contact person from the Hospitals. Notifications will be send to the contacts of the Hospitals. Access credentials to the authorised person from Hospitals will be provided based on the request from Hospitals. Hospitals can login and validate the record. Specific flagging will be there to separate the records that are validated and not validated.

Any Hospitals / third party organisations wanted access to the registry can also request or subscribe separately to the access the registry service.

De-Duplication of the data will be managed through different ways. The registry will not allow any duplicate records. For a location to be unique one or more fields must be different from other GLNs in the registry:

- Address 1
- Address 2
- Address 3
- City
- State
- Pincode
- Location Type

**REGISTRY'S AUTOMATIC CHECK**

The registry automatically checks for any addresses added or edited to ensure that the fields are a set of unique fields. Several results are possible:

- If the address's added are unique after validating with the fields enabled for validation, then the application allocates the GLN and add the record



- If an identical match set of fields is found for the address fields, then the application displays the matching GLN's and asks user to confirm the new location is not a duplicate. The user has the responsibility to ensure the new location is not duplicate
- The added or edited record can then be routed through a workflow or maker checker process to further revalidate
- Open source algorithms ( Phonetic or Soundex ) will also be used as part of the application feature to enable de-duplication

#### 4. Geographical Coordinates

The application will have an interface to capture the Latitude and Longitude of a particular Hospital and the same will be mapped with Google Maps. It will be the responsibility of the Hospitals to capture the coordinates using either mobile application or GPS devices and update the information in the registry. The validation will be done to the extent by taking the City, State and Pincode provided by the user and then cross checking with the coordinates for the region to verify whether coordinates updated is within that range.

GS1 India will not take the responsibility of capturing the coordinates of the respective locations as that can be done only by being physically present on the location

#### 5. Lookup and Search of the Hospital Records

API or Webservice can be provided to any external applications which facilitate search or lookup the data from the registry. These external agencies can be Ministry, Regulatory bodies, private entities etc.

Citizens can search for the data by accessing the portal. There will be basic as well advanced level search options.



## 6. Notifications and Alerts

Notifications and alerts can be set when addition, edition or any changes happens in the application. The users can also subscribe to notifications of specific records when change happens to the same (For e.g. Address change)

## 7. Reports

Default reports can be made available as part of the base functionality. For e.g. Drill down Reports from GLN to details, List of validated records, List of not validated records, Audit Trail, Log Report, Active, Non Active records etc.

## 8. Interoperability with Global Registries

The registry will have ability to inter operate with global registries through GS1 global registry service. Any interoperability with local registries or application can be facilitated thorough API or Webservice, Root directory service

Interoperability refers to interconnecting with the similar registries across the globe. GS1 across the globe has developed similar registries and all these registries will be interconnected and interoperate with each other.

This will provide international visibility to the members of the registry and will enable the lookup or search of the Hospital records from different parts of the world through any of those registries. The registry can be enabled to seamlessly integrate with any external systems, local registries or databases that can potential come up in the future

## 9. Help Desk

A help desk service can be setup to guide the users with the utility of the registry (ADD, EDIT, UPLOAD, SEARCH etc)





52

## Technology Management

As a global standards body and have the knowledge and experience in maintaining similar registries that are interconnected globally, GS1 India can collaborate with MoHFW and own up the responsibility for setting up, managing and maintaining the registry. Maintaining the Infrastructure and time to time technology updates and upgrades will be taken care as part of the engagement.

MoHFW involvement would be required during development phase for freezing the business rules, data attributes and other validations.

Time to time review of the application will be done and necessary updation or changes will be incorporated as part of the continual improvement process.

## Roles and Responsibility

Entity	Responsibility
MoHFW	<ul style="list-style-type: none"><li>• Overall governance of the Registry</li><li>• Hospital data collation, cleansing and upload to the registry</li><li>• Define the scope of the data that will be collected for each hospital</li><li>• Define the process for granting access rights for the hospitals and data quality workflows</li><li>• Helpdesk support for the application</li><li>• Set up process for periodic reviews, action plans to maintain the quality of the data</li></ul>
GS1 India	<ul style="list-style-type: none"><li>• Allocation of unique id's for the Hospitals as per global standards</li><li>• Expertise and guidance in setting up the registry</li></ul>

16-Feb-2016

Version 1.0

14



	<ul style="list-style-type: none"> <li>• Setup, manage and maintain the registry</li> <li>• Training and backend support to the helpdesk</li> <li>• Application level validation to ensure data quality, de-duplication</li> <li>• Ensure interoperability with similar global registries</li> <li>• Maintain the infrastructure, technology updates and upgrades from time to time</li> <li>• Ensure application level capability for interfacing with external systems or applications</li> </ul>
Hospitals	<ul style="list-style-type: none"> <li>• Validate the accuracy and quality of the information updated in the registry</li> <li>• Prompt update of changes and missing information</li> </ul>

### Deliverables

- Global Location Number(GLN) for the Hospitals
- Setup National Hospital Registry - Portal of Hospital Master Data comprising the features and functionalities covered under the features and functionalities header
- Management and Maintenance of the Registry
- Interoperability with ROHINI
- Interoperability with Global Hospital Registries
- Mobile Application Interface for Geo Coordinate Capture and Mapping
- Help Desk Service

### Data Quality

Application level validation for data quality, integration and de-duplication will be taken care to the extent possible that can be managed programmatically. Hospitals will be notified for validation of the data for those records that are setup by the Admin user. Any changes or addition to the records will be routed through approval process to ensure data quality, standards and specification. Hospitals can also subscribe to the registry service and

Any validation beyond that needs to be done through periodic reviews and action plans

16-Feb-2016

Version 1.0

15



A handwritten signature in blue ink, consisting of a stylized 'S' and 'S'.

## Engagement Model

GS1 India proposes following approach to initiate and take this engagement forward:

1. Sign up an MOU between GS1 India and MoHFW agreeing on:
  - Scope
  - Roles and responsibilities
  - Commercials
2. Define the business model
3. Define detailed statement of work
4. Define the Timeline
5. Setup the Registry
6. Allocation of GLN's for the Hospitals in current version of Hospital master data
7. Migrate the current version of Hospital master data
8. Execute a pilot run
9. Review and changes from Pilot
10. Go Live

## Commercials

The subscription fee per GLN is Rs.70 per hospital plus taxes for a period of 3 years and thereafter will be renewed.

The subscription fee is would cover Development, Maintaining, Registering and allocation of GLNs with global registry for a minimum commitment of 2 lakhs hospitals in one go.

GS1 India would allocate a block of numbers to MoHFW for allocation to the hospitals. The above mentioned fees is applicable only to government hospitals administered/managed directly / indirectly by MoHFW

Receipt No : 487754/2017/E-GOVERNANCE



NATIONAL HEALTH MISSION

General Hospital Junction, Thiruvananthapuram 695035

Tel fax: 91-471 2301181, 2302784

email: smdnrhm@gmail.com

Website: www.aogyakeralam.gov.in

No. NHM/1124/ADMIN4/2016/SPMSU

Dated: 29.02.2016

From

State Mission Director

To

✓ Sri.K.B.Agarwal,  
Additional Secretary,  
Ministry of Health & Family Welfare,  
Government of India.

Sir,

Sub:- NHM-National Identification Number of Health Facilities of India (NIN-to-HFI)-nominating  
Nodal Officer-Reg

Ref:- Your letter No.Z-18015/1/2016-eGov, dated 3rd Feb, 2016.

As desired in the letter cited Sri.G.Sunilkumar, State Programme Manager, National Health Mission, Kerala, Thiruvananthapuram is nominated as Nodal Officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination unit, Centre for Health Informatics, New Delhi.

His Email id is:spmnrm2015@gmail.com.Mobile:8943777106.

Yours faithfully

GOKUL G.R I.A.S

State Mission Director

Copy to

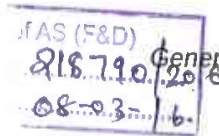
Dr.G.Sunilkumar,  
State Programme Manager,  
NHM, Thiruvananthapuram.

15 (State gov)  
Dis (e-gov)

AD/ehv

File No. Z-18015/1/2016-eGov (Computer No. 3044343 )  
Receipt No : 487754/2017/E-GOVERNANCE  
Generated from eOffice by HUNNY WADHWA, ASO, DOHFW DEPARTMENT on 02/01/20 03:09 PM

Receipt No : 487754/2017/E-GOVERNANCE



NATIONAL HEALTH MISSION

53

General Hospital Junction, Thiruvananthapuram 695035

Tel fax: 91-471 2301181, 2302784

email: smdnrhbm@gmail.com

Website: www.aogyakeralam.gov.in

No. NHM/1124/ADMIN4/2016/SPMSU

Dated: 29.02.2016

From

State Mission Director

To

✓ Sri.K.B.Agarwal,  
Additional Secretary,  
Ministry of Health & Family Welfare,  
Government of India.

Sir,

Sub:- NHM-National Identification Number of Health Facilities of India (NIN-to-HFI)-nominating  
Nodal Officer-Reg

Ref:- Your letter No.Z-18015/1/2016-eGov, dated 3rd Feb, 2016.

As desired in the letter cited Sri.G.Sunilkumar, State Programme Manager, National Health Mission, Kerala, Thiruvananthapuram is nominated as Nodal Officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination unit, Centre for Health Informatics, New Delhi.

His Email id is: spmnrhm2015@gmail.com. Mobile: 8943777106.

Yours faithfully

AD(eGov)

GOKUL G.R.I.A.S

State Mission Director

Copy to

Dr.G.Sunilkumar,  
State Programme Manager,  
NHM, Thiruvananthapuram.

ss(eGov)  
Dir(eGov)

Uratt #1 of File NHM/1124/ADMIN4/2016/SPMSU Approved by State Mission Director on 29-Feb-2016 04:32 PM - Page 1

Subject: **Meeting of Committee for implementation of National Identification Number(NIN) on 15th March, 2016 at 11.00 AM**

Date: 03/14/16 05:20 PM

From: "Amit Kumar" <amit.k89@gov.in>

To: asfnd.kb@gmail.com, Sunil Sharma JS <sunil.sharma62@gov.in>, dir.ehealth@gmail.com, Deepti <deepti.srivastava@nic.in>, Sunil Kumar <sunil.bhushan@gov.in>, dr.amitmishra@gmail.com, at@nihfw.org, ankit\_tripathi11@hotmail.com

52

### Meeting Notice

**Subject: Meeting of Committee for implementation of National Identification Number(NIN) on 15th March, 2016 at 11.00 AM in 152-A wing Nirman Bhawan, New Delhi.**

**Committee for implementation of National Identification Number(NIN)** has been constituted in MoHFW with the approval of Secretary (HFW) for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN across India.

A meeting of the Committee under the Chairmanship of Shri K B Agarwal AS(eGov) has now been scheduled for **11.00 AM on 15th March, 2016** in Room No 152-A wing, Nirman Bhawan, New Delhi.

All the addressees are requested to kindly make it convenient to attend the meeting as per the above schedule.

**To:**

1. Smt. Deepti Srivastava (Director, Stats)
2. Shri. Sunil Kumar Bhushan, NIC, Health
3. Shri Ankit Tripathi, AD, CHI
4. Mr Amit Mishra, Senior Consultant, NHSRC
5. PL (ePMU team), MoHFW

**Copy to:**

1. PPS to AS (KBA), MoHFW
2. PPS to JS (eGov), MoHFW
3. PA to Director(eGov), MoHFW

Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health & Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011



के बी अग्रवाल  
अपर सचिव भा.प्र.से.

**K B Agarwal**  
IAS  
Additional Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011

Government of India  
Ministry of Health & Family Welfare

Z-18015/1/2016-eGov  
Dated: 3<sup>rd</sup> Feb, 2016

**Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).**

Dear Colleague,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in)/ [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login. There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by 7<sup>th</sup> March, 2016.

With Regards,

Yours Sincerely,

(K. B. Agarwal)

Dr. Sukhato A. Sema  
Mission Director (NHM)  
Department of Health & Family Welfare,  
Govt. of Nagaland, Secretariat Kohima, Nagaland-797001

The letter is to be issued to all State Mission Directors. Pls issue & I by speed post



Chauhan  
10-2-16

Tel. : 011-23061887  
011-23061108

Email: [asfnd.kb@gmail.com](mailto:asfnd.kb@gmail.com)  
Nirman Bhawan, New Delhi-110011



बी अग्रवाल  
अपर सचिव भा.प्र.से.

K B Agarwal  
IAS  
Additional Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare

Z-18015/1/2016-eGov  
Dated: 3<sup>rd</sup> Feb, 2016

**Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).**

Dear Colleague,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) / [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login. There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by 7<sup>th</sup> March, 2016.

With Regards,

Yours Sincerely,

(K. B. Agarwal)

Shri R. K. Mahajan  
Principal Secretary (Health & FW)  
Department of Health  
Government of Bihar  
Vikas Bhawan, New Secretariat,  
Patna-800 015, Bihar

The letter is to be issued to all the State Principal Secretaries. Pls issue R&I by speed post



Chauhan  
10-2-16.

Tel. : 011-23061887  
011-23061108

e-mail : [asfnd.kb@gmail.com](mailto:asfnd.kb@gmail.com)  
Nirman Bhawan, New Delhi-110011

D. F. A.

49

Z-18015/1/2016-eGov  
Date: 27<sup>th</sup> January 2016

**Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).**

Dear Colleagues,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in)/ [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login . There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by 7<sup>th</sup> March, 2016.

With Regards,

Yours Sincerely

  
(K B Agarwal)

To,

1. Principal Secretaries (Health) of all States/UTs
2. MD, NHM of all States/UTs

48

Z-18015/1/2016-eGov  
Date: 27th January 2016

Subject: National Identification Number to Health Facilities of India (NIN-2-HFI). <sup>to</sup>

Dear Colleagues,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added <sup>as and when such need arises.</sup> whenever required.

~~However, NIN will form the basis for creating interoperable electronic records systems.~~

2. The Centre for Health Informatics has developed the web application to generate NIN-2-HFI. End-users will be able to confirm by giving NIN through central database and will <sup>confirm</sup> display its available attributes, if found correct. This site <sup>has been</sup> is developed to confirm and verify the existence of the facility. <sup>to</sup>

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number <sup>therefore</sup> verification of health facilities and their attributes is <sup>essential</sup> very much required. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. <sup>to</sup> NIN-2-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - ankit.tripathi@gov.in/at@nihfw.org ). User manual for this application is available to the users once they login <sup>successfully</sup>. <sup>There</sup> This will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed ~~within one month~~ <sup>by 7<sup>th</sup> March, 2016</sup>.

With Regards,

Yours Sincerely

(K B Agarwal)

To,

1. Principal Secretaries (Health) of all States/UTs
2. MD, NHM of all States/UTs

Z-18015/1/2016-eGov  
Date: 27<sup>th</sup> January 2016

**Subject: National Identification Number to Health Facilities of India (NIN-2-HFI).**

Dear Colleagues,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added whenever required.

The Centre for Health Informatics has developed the web application to generate NIN-2-HFI. End-users will be able to confirm by giving NIN through central database and will display its available attributes, if found correct. This site is developed to confirm and verify the existence of the facility.

MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number therefore verification of health facilities and their attributes is very much required. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases ***to ensure inter-operability among applications.***

NIN-2-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) / [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login successfully. This will be two stage verification process at State and District level.

I would request you to complete this task as one of your top priority items as the exercise needs to be completed within one month.

With Regards,

Yours Sincerely

(K B Agarwal)

To,

1. Principal Secretaries (Health) of all States/UTs
2. MD, NHM of all States/UTs





46

Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**Requesting to organise a meeting between MoHFW and IIB**

3 messages

**Ashish Sharma** <ashish.sharma91@gov.in>

Tue, Dec 29, 2015 at 12:34 PM

To: shobha.mishra@ficci.com

Cc: dir.ehealth@gmail.com, amitkumariss34@gmail.com, chandrasens@deloitte.com

Respected Madam,

Shri Sunil Sharma , JS (e-Governance), MoHFW along with other officials from Ministry attended the recently organised FICCI 8th Annual Health Insurance Conference; 'Creating Value through Customer Centricity', during 9-10 December 2015.

2. During the course of the conference it came to the knowledge that the Insurance Information Bureau (IIB) of India has launched a registry of 32651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlement.

3. With a similar objective, MoHFW is also in the process of assigning unique National Identification Number (NIN) to all health facilities in India which is a 10 digit number.

4. In this context, you are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI beforehand to evaluate convergence of efforts and address potential changes.

Regards

Ashish Sharma  
Assistant Section Officer (e-Governance)  
MoHFW  
Ph: 23062263

**Amit Kumar** <amitkumariss34@gmail.com>

Wed, Dec 30, 2015 at 11:08 AM

To: anirudh.sen@ficci.com

Sir,

Please refer to the trailing mail.

You are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI .

*Regards*

*Amit Kumar*  
*Assistant Director (eGovernance)*  
*Ministry of Health & Family Welfare*  
*Room No. 425C*

Receipt No : 487754/2017/E-GOVERNANCE

*Nirman Bhawan**New Delhi - 110 011**Tel: 011 - 2306 2263**Mobile: 9582861973*

[Quoted text hidden]

15

Anirudh Sen <anirudh.sen@ficci.com>  
To: Amit Kumar <amitkumariss34@gmail.com>

Wed, Dec 30, 2015 at 11:11 AM

Dear Amit Ji,

We would be happy to facilitate this meeting. May I request you to please share some dates convenient to Mr Sharma, so that we also check with Mr Raghavan, CEO, IIB.

Regards,  
Anirudh

Sent from my iPhone

[Quoted text hidden]

This message is intended for the addressee only and may contain confidential or privileged information. The communication is the property of FICCI and its affiliates and may contain copyright material or intellectual property of FICCI and/or any of its related entities or of third parties. If you are not the intended recipient of the communication or have received the communication in error, please notify the sender or FICCI immediately, return the communication (in entirety) and delete the communication (in entirety and copies included) from your records and systems. Unauthorized use, disclosure or copying of this communication or any part thereof is strictly prohibited and may be unlawful.

Tentatively 15/1/16

OLC

168  
44

File No. M-12013/2/2015-eGov

Government of India / भारत सरकार

D/o Health and Family Welfare/ स्वास्थ्य एवं परिवार कल्याण विभाग

e-Governance Section /(ई गवर्नेंस अनुभाग)

\*\*\*\*\*

निर्माण भवन, नई दिल्ली

दिनांक: 07<sup>th</sup> जनवरी, 2016

The Director,  
NIHFW  
Baba Gang Nath Marg,  
Munirka, New Delhi-110067.

**Subject: Approval for Manpower and Infrastructure proposal for CHI under NIHFW for NIN implementation.**

Sir,

The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number (NIN) of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

2. For successful implementation of NIN by CHI, NIHFW, approval of competent authority of MoHFW is conveyed for the following:-

- (i) Creation of ePMU/PMT through National Institute for Smart Governance (NISG) for the purpose of immediate start of the project with the following structure:
  - a. Project Lead -- 1 No.
  - b. Consultants -- 2 No.
  - c. Associate Consultants -- 2 No.

A communication in this regard has already been made to NISG vide email dated 06.01.2016. (Copy enclosed).

- (ii) Necessary sitting space with internet connection, telephone connections (initially 3) with conference and STD facility and other related infrastructure is required for ePMU Team and other officials at CHI. Possibilities may be explored to allocate additional office space in NIHFW campus / administrative block. Otherwise, suitable space may be rented outside to carry on the expanding work from MoHFW on various eGovernance activities.
- (iii) One dedicated (additional) vehicle for the transportation of CHI officials to coordinate in various events of eGovernance division of MoHFW like NIN and other eGovernance related work on daily basis.



Receipt No : 487754/2017/E-GOVERNANCE

161  
(43)

3. All the expenditure on the above account will be met from the allocated NHP project funds.

4. This issues with the approval of Secretary (HFW).



जितेंद्र अरोड़ा

(जितेंद्र अरोड़ा)

निदेशक (ई गवर्नेंस)

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

फोन : 23062317

Copy to:

Prof. S N Sarbadhikari, PD, CHI, NIHFW

A issue R.E.I  
By speed post  
Chauhan  
8-1-16.

Receipt No : 487754/2017/E-GOVERNANCE



Amit Kumar &lt;amitkumariss34@gmail.com&gt;

**Fwd: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).**

1 message

Jitendra Arora <dir.ehealth@gmail.com>  
To: Amit Kumar <amitkumariss34@gmail.com>

Thu, Jan 7, 2016 at 3:22 PM

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

----- Forwarded message -----

From: **Jitendra Arora** <dir.ehealth@gmail.com>  
Date: Wed, Jan 6, 2016 at 6:49 PM  
Subject: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).  
To: Sudhir Saxena <sudhir.saxena@nisg.org>  
Cc: "director@nihfw.org" <director@nihfw.org>, "Prof. Supten Sarbadhikari" <supten@gmail.com>

**Dear Sir,**

Kindly refer to the proposal received from NISG dated 24.09.2015 regarding creation of PMU in Telemedicine division at MoHFW and the MOU between MoHFW & NISG signed on 12.10.15.

2. An additional team for Centre for Health Informatics (CHI) and letter is enclosed.
3. You are requested to complete the process of short listing of resumes at the earliest in consultation with e-Gov Division, MoHFW. The hiring and deployment of consultants may be completed by 31.01.2016.

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

**Creation of PMU in CHI.pdf**  
267K

165  
41

M-12013/02/2015-eGov  
Government of India  
Ministry of Health & Family Welfare  
Department of Health & Family Welfare

Nirman Bhawan, New Delhi-110011  
Dated the 6<sup>th</sup> January, 2016

Shri. Sudhir Saxena  
VP, National Institute for Smart Government  
Mahanagar Door Sanchar Sadan,  
9, CGO Complex, Residential Complex,  
1st floor New Delhi-110003

**Subject: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).**

Sir,

Kindly refer to the proposal received from NISG dated 24.09.2015 regarding creation of PMU in Telemedicine division at MoHFW and the MOU between MoHFW & NISG signed on 12.10.15.

2. An additional team for Centre for Health Informatics (CHI) is also required to be created and it is informed that competent authority has given in-principle approval for the following positions:

S.No	Designation	Qualification & Experience	Annual Salary band	No. of Position
1.	Project Lead	B.E/B.Tech + MCA/MBA/ Post Graduation (IT) with 11-15 years of experience	Rs. 16-20 Lacs	1
2.	Consultant	B.E/B.Tech+ MCA/MBA/ Post Graduation (IT) with 7-10 years of experience	Rs. 11-15 Lacs	2
3.	Associate Consultant	B.E/B.Tech/MCA/MBA/ Post Graduation (IT) or equivalent with 3-6 years of experience OR MBBS with 3 years of Experience in Health Informatics	Rs. 5-10 Lacs	2

3. Since the requirement is urgent, you are requested to complete the process of short listing of resumes at the earliest in consultation with e-Gov Division, MoHFW. The hiring and deployment of consultants may be completed by 31.01.2016.

Yours faithfully

*Jitendra Arora*  
(Jitendra Arora)  
Director (eGov)

Copy to:

Director, NIHF, Delhi

(सह सचिव, स्वास्थ्य सेवा)  
(सह सचिव, स्वास्थ्य सेवा)  
स्वास्थ्य सेवा विभाग, नई दिल्ली  
110011

O/c

764  
(40)

File No. M-12013/2/2015-eGov

Government of India / भारत सरकार

D/o Health and Family Welfare/ स्वास्थ्य एवं परिवार कल्याण विभाग

e-Governance Section /(ई गवर्नेंस अनुभाग)

\*\*\*\*\*

निर्माण भवन, नई दिल्ली

दिनांक: 07<sup>th</sup> जनवरी, 2016

The Director,  
NIHFW  
Baba Gang Nath Marg,  
Munirka, New Delhi-110067.

**Subject: Approval for Manpower and Infrastructure proposal for CHI under NIHFW for NIN implementation.**

Sir,

The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number (NIN) of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

2. For successful implementation of NIN by CHI, NIHFW, approval of competent authority of MoHFW is conveyed for the following:-

- (i) Creation of ePMU/PMT through National Institute for Smart Governance (NISG) for the purpose of immediate start of the project with the following structure:
  - a. Project Lead -- 1 No.
  - b. Consultants -- 2 No.
  - c. Associate Consultants -- 2 No.

A communication in this regard has already been made to NISG vide email dated 06.01.2016. (Copy enclosed).

- (ii) Necessary sitting space with internet connection, telephone connections (initially 3) with conference and STD facility and other related infrastructure is required for ePMU Team and other officials at CHI. Possibilities may be explored to allocate additional office space in NIHFW campus / administrative block. Otherwise, suitable space may be rented outside to carry on the expanding work from MoHFW on various eGovernance activities.
- (iii) One dedicated (additional) vehicle for the transportation of CHI officials to coordinate in various events of eGovernance division of MoHFW like NIN and other eGovernance related work on daily basis.

3. All the expenditure on the above account will be met from the allocated NHP project funds.
4. This issues with the approval of Secretary (HFW).



Copy to:

Prof. S N Sarbadhikari, PD, CHI, NIHFW

जितेंद्र अरोड़ा  
(जितेंद्र अरोड़ा)  
निदेशक (ई गवर्नेंस)  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
फोन : 23062317

PI Issue f&I  
By speed post  
Chauhan  
8-1-16



Amit Kumar &lt;amitkumariss34@gmail.com&gt;

162

38

**Fwd: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).**

Thu, Jan 7, 2016 at 3:22 PM

Jitendra Arora <dir.ehealth@gmail.com>  
To: Amit Kumar <amitkumariss34@gmail.com>

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

----- Forwarded message -----

From: Jitendra Arora <dir.ehealth@gmail.com>  
Date: Wed, Jan 6, 2016 at 6:49 PM  
Subject: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).  
To: Sudhir Saxena <sudhir.saxena@nisg.org>  
Cc: "director@nihfw.org" <director@nihfw.org>, "Prof. Supten Sarbadhikari" <supten@gmail.com>


**Dear Sir,**

Kindly refer to the proposal received from NISG dated 24.09.2015 regarding creation of PMU in Telemedicine division at MoHFW and the MOU between MoHFW & NISG signed on 12.10.15.

2. An additional team for Centre for Health Informatics (CHI) and letter is enclosed.
3. You are requested to complete the process of short listing of resumes at the earliest in consultation with e-Gov Division, MoHFW. The hiring and deployment of consultants may be completed by 31.01.2016.

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

 Creation of PMU in CHI.pdf  
267K



M-12013/02/2015-eGov  
Government of India  
Ministry of Health & Family Welfare  
Department of Health & Family Welfare

Nirman Bhawan, New Delhi-110011  
Dated the 6<sup>th</sup> January, 2016

Shri. Sudhir Saxena  
VP, National Institute for Smart Government  
Mahanagar Door Sanchar Sadan,  
9, CGO Complex, Residential Complex,  
1st floor New Delhi-110003

**Subject: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).**

Sir,

Kindly refer to the proposal received from NISG dated 24.09.2015 regarding creation of PMU in Telemedicine division at MoHFW and the MOU between MoHFW & NISG signed on 12.10.15.

2. An additional team for Centre for Health Informatics (CHI) is also required to be created and it is informed that competent authority has given in-principle approval for the following positions:

S.No	Designation	Qualification & Experience	Annual Salary band	No. of Position
1.	Project Lead	B.E/B.Tech + MCA/MBA/ Post Graduation (IT) with 11-15 years of experience	Rs. 16-20 Lacs	1
2.	Consultant	B.E/B.Tech+ MCA/MBA/ Post Graduation (IT) with 7-10 years of experience	Rs. 11-15 Lacs	2
3.	Associate Consultant	B.E/B.Tech/MCA/MBA/ Post Graduation (IT) or equivalent with 3-6 years of experience OR MBBS with 3 years of Experience in Health Informatics	Rs. 5-10 Lacs	2

3. Since the requirement is urgent, you are requested to complete the process of short listing of resumes at the earliest in consultation with e-Gov Division, MoHFW. The hiring and deployment of consultants may be completed by 31.01.2016.

Yours faithfully

*Jitendra Arora*  
(Jitendra Arora)  
Director (eGov)

Copy to:

Director, NIHFW, Delhi

*(Signature)*  
(Jitendra Arora)  
Director (eGov)



नी.एस. विजयन

अध्यक्ष

T.S. Vijayan

Chairman



भारतीय बीमा विनियामक और विकास प्राधिकरण

INSURANCE REGULATORY AND  
DEVELOPMENT AUTHORITY OF INDIA

September 15, 2015

Dear Sir,

**Sub: Registry of Hospitals in Network of Insurance (ROHINI)**

As you are aware, the Insurance Regulatory and Development Authority of India (IRDAI) is a regulatory body established by an Act of Parliament to regulate and ensure orderly growth of insurance sector in India. One of the major and fast growing components of the insurance industry is health insurance business which stands at more than Rs.20,000 crore during the year 2014-15 (including Government sponsored schemes). Health insurance has also been recognised as a social security measure and has been promoted by successive Governments. However, there are several challenges being faced, starting from huge variation - in infrastructure facilities, expenses incurred on a particular treatment, availability of a particular treatment at a hospital, technology being used and the role played by Third Party Administrators etc.

2. In view of such a diverse environment, pricing of health insurance products has always been a challenge for the insurance industry. Further, many a time, the beneficiaries are also under confusion as to the cost vis-a-vis technology being used for a particular treatment in a particular hospital. Keeping all these in view, the IRDAI has contemplated the creation of a Registry of Hospitals in Network of Insurance (ROHINI) through Insurance Information Bureau of India (IIB).

3. IIB, a society promoted by IRDAI with the objective to serve the insurance industry by collecting and processing sector level data and using such a database for the benefit of all stakeholders including the IRDAI, has taken up this task of creation of ROHINI. The IIB has collated data pertaining to hospitals in the country where insurers have paid claims. This has resulted in a register of 32,561 hospitals. The IIB is now in the process of tagging each hospital in the Registry with a 13 digit Global Unique Identification Number as also its Geo coding.

4. The benefits that are being envisaged out of this project are immense. The Registry being created will enable National, State and Regional level analysis thus enabling data analytics pertaining to treatment costs, patterns of disease occurrence in a particular region etc.

परिश्रम भवन, तीसरा तल, बशेरबाग, हैदराबाद-500 004. भारत

☎ : +91-40-6682 0957, फैक्स: 91-40-6682 3334

ई-मेल: chairman@irda.gov.in वेब: www.irda.gov.in

Parishram Bhavan, 3rd Floor, Basheer Bagh, Hyderabad-500 004. INDIA.

Ph.: +91-40-6682 0957, Fax: +91-40-6682 3334

E-mail: chairman@irda.gov.in, Web: www.irda.gov.in

159  
35

: 2 :

Further, a portal is being created and all the data being collected is proposed to be hosted on the portal. The portal proposes to create an interface where hospitals can voluntarily empanel themselves as well as update the existing information pertaining to them. Since the portal offers de-duplicated authentic data of hospitals, the general public as well as the insurance industry can have access to hospital data at the ease of a click. In future, it is proposed to make this portal more comprehensive by enabling electronic processing of claims as also seamless transfer of medical records of patients between hospitals and insurance companies.

5. We at IRDAI believe that, the beginning made by IIB would transform the health insurance sector bringing in more efficiency and transparency in all aspects starting from pricing to settlement of claims.

6. Since the portal and the database are ready, I am writing to request you to kindly consent to launch the same at a date and time convenient to you. The IRDAI as well as the insurance industry would be honoured to have you amongst us and guide us in this endeavour. The event is proposed to be held at Mumbai.

With regards,

Yours truly,



(T.S. Vijayan)

**Shri JP Nadda**  
**Hon'ble Minister for Health & Family Welfare**  
**C Block, Nirman Bhawan,**  
**New Delhi - 110 001**

158  
(34)

**No.S.12012/175/2015-RSBY**  
**Government of India**  
**Ministry of Health and Family Welfare**  
**[RSBY Division]**

**Subject: Registry of Hospitals in Network of Insurance (ROHINI)**

**S.No.1(FR) p.1/c**

407/2015

Insurance Regulatory and Development Authority (IRDA) has contemplating the creation of Registry of Hospitals in Network of Insurance (ROHINI) through Insurance Information Bureau of India (IIB) in order to monitor various challenges in infrastructure facilities, expenses incurred on a particular treatment, availability of a particular treatment at a hospital, technology being used and the role played by Third Party Administrators (TPA) etc.

IIB, a society promoted by IRDA with the objective to serve insurance industry by collecting and processing sector level data and using such database for the benefit of stakeholders including IRDA. As per collated data pertaining to hospitals in the country where insurer have paid claims, 32,561 hospitals are registered. Now process of tagging each hospital in the Registry with a 13 digit Global Unique Identification Number under Geo coding. The benefits that are envisaged out of this process will enable data analytics pertaining to treatment of costs, patterns of disease occurrence in particular region etc. All the data collected is proposed to be hosted on the portal to create an interface where hospital can voluntarily empanel themselves as well as update the exiting information pertaining to them. General public as well as the insurance industry can have access at the ease of a click which enable electronic processing of claims as also seamless transfer of medical records of patients between hospital and insurance company.

3. As the portal and database is now ready to launch, Chairman, IRDA has sought the consent of Hon'ble HFM and his convenience about time and a date to launch the same. The proposed event is to be held at Mumbai.

4. Submitted for kind consideration and approval of Hon'ble HFM

23/9/2015

Asstt. Secy (RSBY)

23/9/15

**US (RSBY)**

DS (RSBY)

23.09.15  
(G.L.Madan)  
SO (RSBY)  
23.09.2015

23/9/15

dates for making could not be given due  
pre-occupation of HFM. May kindly check if  
request is still valid. More details of  
would be needed for slotting the

annual  
annual

21/12

157  
33

11. Check with IRDA and submit  
22/11/15

DS (KSP)

22/11/15

Ms Anitha  
23/12/15

Office of M/o H&FW  
Dy. No. 2033518  
Date 22/12/15

P So (RSP)

The subject matter was discussed with  
Mr. Narendar Assistant Director, PS to Chairman  
IRDA, over telephone and he informed that  
the proposed portal is already launched  
around 10 days back.

Submitted for kind consideration  
please.

21/12/2015

28/12/15

(From prop)

- 3 -

HSE  
32

If yes. We would need a meeting with  
IIB officials to understand the total  
scope of their project and how their  
hospitals can come on board the NHN.

Dr eGov/ ~~Health~~ Tech Dr (NIC)

*[Signature]*  
4/1/16

The necessary action is being taken  
by eGov division in our file.  
File is returned herewith to RSBY division.

*[Signature]*  
5/1/16

DS(RSBY)



Receipt No : 487754/2017/E-GOVERNANCE

Subject: **Constitution of committee for providing strategic and technical guidance to CHI for implementation of National Identification Number (NIN).**

Date: 01/08/16 05:42 PM

From: "Ashish Sharma" &lt;ashish.sharma91@gov.in&gt;

To: asfnd.kb@gmail.com, Sunil Sharma JS <sunil.sharma62@gov.in>, dir.ehealth@gmail.com, Deepti <deepti.srivastava@nic.in>, director@nihfw.org, Sunil Kumar <sunil.bhushan@gov.in>, dr.amitmishra@gmail.com, at@nihfw.org, ankit\_tripathi11@hotmail.com

Cc: amitkumariss34@gmail.com

constitution of committee for providing strategic ... (425kB)

Respected Sirs/Madam,

The Ministry of Health and Family Welfare has initiated a process for generation of National Identification Number (NIN) for all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

2. With approval of Secretary (HFW), it has been decided to constitute a committee for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN across India.

3. Please find attached the constitution order of the committee.

Regards

Ashish Sharma

Assistant Section Officer (eGov)

MoHFW, New Delhi

Ph: 011-23062263

Subject: **Approval for Manpower and Infrastructure proposal for CHI for NIN implementation.** Date: 01/08/16 05:29 PM

From: "Ashish Sharma" <ashish.sharma91@gov.in>

To: Director <director@nihfw.org>, supten@gmail.com, at@nihfw.org,  
ankit\_tripathi11@hotmail.com, supten@nihfw.org

Cc: jitendra.arora@gov.in, dir.ehealth@gmail.com,  
amitkumariss34@gmail.com

approval for manpower and infrastructure proposal ... (1.5MB)

Creation of PMU in CHI.pdf (274kB)

Sir,

The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number (NIN) of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015. 2. For successful implementation of NIN by CHI, NIHFW, approval of competent authority of MoHFW is conveyed for the following:-

(i) Creation of ePMU/PMT through National Institute for Smart Governance (NISG) for the purpose of immediate start of the project with the following structure:

- |                          |          |
|--------------------------|----------|
| a. Project Lead          | -- 1 No. |
| b. Consultants           | -- 2 No. |
| c. Associate Consultants | -- 2 No. |

A communication in this regard has already been made to NISG vide email dated 06.01.2016. A copy of which has also been endorsed to you.

(ii) Necessary sitting space with internet connection, telephone connections (initially 3) with conference facility and STD facility and other related infrastructure is required for ePMU Team and other officials at CHI. Possibilities may be explored to allocate additional space in NIHFW administrative block. Otherwise, suitable space may be rented outside to carry on the expanding work from MoHFW on various eGovernance activities.

(iii) One dedicated vehicle for the transportation of CHI officials to coordinate in various events of eGovernance division of MoHFW like NIN and other eGovernance related work on daily basis.

3. All the expenditure on the above account will be met from the allocated NHP project funds.

4. This issues with the approval of Secretary (HFW)

Regards

Ashish Sharma  
Assistant Section Officer (eGov)  
MoHFW



Receipt No : 487754/2017/E-GOVERNANCE

Office Copy

+55  
(29)

Subject: Constitution of committee for providing strategic and technical guidance to CHI for implementation of NIN

S.NO	Name	Designation	Address	Sign
1.	Shri K B Agarwal	AS (eGov)	106 - D	9/1/16
2.	Shri Sunil Sharma	JS (eGov)	112 - D	9/1/16
3.	Shri Jitendra Arora	Director (eGov)	307 - D	9/1/16
4.	Smt Deepti Srivastava	Director (Stats)	513 - A	9/1/16
5.	Shri Sunil Kumar	STD (NIC)	146-A	9/1/16
6.	Prof J K das	NIHFW	NIHFW	

FTS:170954

At ksw REI  
By speed post

Chauhan

8-1-16.

स्पीड पोस्ट द्वारा  
BY SPEED POST



170928

H2  
(28)

File No. M-12013/2/2015-eGov  
 Government of India / भारत सरकार  
 D/o Health and Family Welfare/ स्वास्थ्य एवं परिवार कल्याण विभाग  
 e-Governance Section / (ई गवर्नेंस अनुभाग)  
 \*\*\*\*\*

निर्माण भवन, नई दिल्ली  
 दिनांक: 07<sup>th</sup> जनवरी, 2016

**ORDER**

**Subject:** Constitution of committee for providing strategic and technical guidance to CHI for implementation of National Identification Number (NIN).

The Ministry of Health and Family Welfare has initiated a process for generation of National Identification Number (NIN) for all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

2. With approval of Secretary (HFW), it has been decided to constitute a committee with the following composition for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN across India:

(i)	Additional Secretary (eGov)	-	Chairman
(ii)	Joint Secretary (eGov)	-	Member
(iii)	Director (eGov)	-	Member
(iv)	Smt. Deepti Srivastava (Director, Stats)	-	Member
(v)	Shri Sunil Kumar (STD, NIC)	-	Member
(vi)	Shri Amit Mishra (Consultant, NHSRC)	-	Member
(vii)	Shri Ankit Tripathi (Addl. Director CHI, NIHFW)	-	Member Secretary

(जितेंद्र अरोड़ा)

निदेशक (ई गवर्नेंस)

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

फोन : 23062317

To

1. All members of the Committee
2. Director, NIHFW : The committee would be serviced by CHI.

151  
(27)

**M-12013/02/2015-eGov**  
**Government of India**  
**Ministry of Health & Family Welfare**  
**Department of Health & Family Welfare**

**Nirman Bhawan, New Delhi-110011**  
**Dated the 6<sup>th</sup> January, 2016**

Shri. Sudhir Saxena  
VP, National Institute for Smart Government  
Mahanagar Door Sanchar Sadan,  
9, CGO Complex, Residential Complex,  
1st floor New Delhi-110003

**Subject: Creation of Program Management Unit (PMU) in Centre for Health Informatics (CHI).**

Sir,

Kindly refer to the proposal received from NISG dated 24.09.2015 regarding creation of PMU in Telemedicine division at MoHFW and the MOU between MoHFW & NISG signed on 12.10.15.

2. An additional team for Centre for Health Informatics (CHI) is also required to be created and it is informed that competent authority has given in-principle approval for the following positions:

S.No	Designation	Qualification & Experience	Annual Salary band	No. of Position
1.	Project Lead	B.E/B.Tech + MCA/MBA/ Post Graduation (IT) with 11-15 years of experience	Rs. 16-20 Lacs	1
2.	Consultant	B.E/B.Tech+ MCA/MBA/ Post Graduation (IT) with 7-10 years of experience	Rs. 11-15 Lacs	2
3.	Associate Consultant	B.E/B.Tech/MCA/MBA/ Post Graduation (IT) or equivalent with 3-6 years of experience OR MBBS with 3 years of Experience in Health Informatics	Rs. 5-10 Lacs	2

3. Since the requirement is urgent, you are requested to complete the process of short listing of resumes at the earliest in consultation with e-Gov Division, MoHFW. The hiring and deployment of consultants may be completed by 31.01.2016.

Yours faithfully

*Jitendra Arora*  
(Jitendra Arora)  
Director (eGov)

Copy to:

Director, NIHFW, Delhi

(जीतिन्द्र अरोड़ा)  
(JITENDRA ARORA)  
निदेशक / Director  
स्वास्थ्य एवं परिवार कल्याण विभाग  
Ministry of Health & F.W.  
संस्कृत, भारत सरकार / Govt. of India  
नई दिल्ली / New Delhi

Gmail - RE: Requesting to organise a meeting between MoHFW and IIB

Page 1 of 3



Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

(24) 148

**RE: Requesting to organise a meeting between MoHFW and IIB****Anirudh Sen** <anirudh.sen@ficci.com>

Tue, Jan 5, 2016 at 4:37 PM

To: Amit Kumar &lt;amitkumariss34@gmail.com&gt;

Cc: Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Dear Amit ji,

Mr Raghavan, CEO, IIB has indicated his availability on 12<sup>th</sup> and 13<sup>th</sup> January for the meeting, with more preference on 12<sup>th</sup> January.

Kindly confirm, so that I can intimate him and he can plan his travel accordingly.

With regards,

Anirudh



Anirudh Sen | Deputy Director – Health Services | Health Insurance

Industry's Voice for Policy Change

**Federation of Indian Chambers of Commerce and Industry**

A: Federation House, Tansen Marg, New Delhi - 110 001

T: 011 - 23487445 (D) | M: +91-9810170348 | F: 91-11-23320714, 23721504

E: anirudh.sen@ficci.com ; healthservices@ficci.com | W: www.ficci.com



Please be conscious of the environment; print this email only if necessary!

**From:** Amit Kumar [mailto:amitkumariss34@gmail.com]**Sent:** 30 December 2015 11:08**To:** Anirudh Sen <anirudh.sen@ficci.com>**Subject:** Fwd: Requesting to organise a meeting between MoHFW and IIB

Sir,

Please refer to the trailing mail.

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=15...> 1/6/2016AD/Kew)  
ON FileJhon  
5/1/16

Receipt No : 487754/2017/E-GOVERNANCE

Gmail - RE: Requesting to organise a meeting between MoHFW and IIB

Page 2 of 3

+47

(23)

● You are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI .

*Regards*

*Amit Kumar*  
*Assistant Director (eGovernance)*  
*Ministry of Health & Family Welfare*  
*Room No. 425C*  
*Nirman Bhawan*  
*New Delhi - 110 011*  
*Tel: 011 - 2306 2263*  
*Mobile: 9582861973*

----- Forwarded message -----

From: **Ashish Sharma** <ashish.sharma91@gov.in>

Date: Tue, Dec 29, 2015 at 12:34 PM

Subject: Requesting to organise a meeting between MoHFW and IIB

To: shobha.mishra@ficci.com

Cc: dir.ehealth@gmail.com, amitkumariss34@gmail.com, chandrasens@deloitte.com

Respected Madam,

Shri Sunil Sharma , JS (e-Governance), MoHFW along with other officials from Ministry attended the recently organised FICCI 8th Annual Health Insurance Conference; 'Creating Value through Customer Centricity', during 9-10 December 2015.

2. During the course of the conference it came to the knowledge that the Insurance Information Bureau (IIB) of India has launched a registry of 32651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlement.

3. With a similar objective, MoHFW is also in the process of assigning unique National Identification Number (NIN) to all health facilities in India which is a 10 digit number.

4. In this context, you are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI beforehand to evaluate convergence of efforts and address potential changes.

Regards

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=15...> 1/6/2016



Gmail - RE: Requesting to organise a meeting between MoHFW and IIB

Page 2 of 3

Hf  
(22)

You are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI .

*Regards*

*Amit Kumar*  
*Assistant Director (eGovernance)*  
*Ministry of Health & Family Welfare*  
*Room No. 425C*  
*Nirman Bhawan*  
*New Delhi - 110 011*  
*Tel: 011 - 2306 2263*  
*Mobile: 9582861973*

----- Forwarded message -----

From: **Ashish Sharma** <ashish.sharma91@gov.in>  
Date: Tue, Dec 29, 2015 at 12:34 PM  
Subject: Requesting to organise a meeting between MoHFW and IIB  
To: shobha.mishra@ficci.com  
Cc: dir.ehealth@gmail.com, amitkumariss34@gmail.com, chandrasens@deloitte.com

Respected Madam,

Shri Sunil Sharma , JS (e-Governance), MoHFW along with other officials from Ministry attended the recently organised FICCI 8th Annual Health Insurance Conference; 'Creating Value through Customer Centricity', during 9-10 December 2015.

2. During the course of the conference it came to the knowledge that the Insurance Information Bureau (IIB) of India has launched a registry of 32651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlement.
3. With a similar objective, MoHFW is also in the process of assigning unique National Identification Number (NIN) to all health facilities in India which is a 10 digit number.
4. In this context, you are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI beforehand to evaluate convergence of efforts and address potential changes.

Regards

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=inbox&msg=15...> 1/6/2016

144  
20

**Centre for Health Informatics  
National Institute of Health and Family Welfare, New Delhi-110067**

To  
Director  
eGovernance,  
Ministry of Health and Family Welfare,  
New Delhi

No.: NIHFW/CHI/eGov/NIN/ 2015  
Dated: December 15, 2015

**Subject: Engagement of Centre for Health Informatics (CHI) for National Identification Number Implementation (NIN) in India.**

This is in reference to the MoHFW letter no. F No. M-12013/2/2015-eGov dated 1<sup>st</sup> December, 2015 for engagement of Centre for Health Informatics (CHI) for National Identification Number Implementation (NIN) in India. (Annexure attached)

1. The Centre for Health Informatics (CHI)/NHP, (NIHFW) has developed the initial web application/ Software for NIN generation and verification. The application is available on <http://nin.nhp.gov.in>. As per the MoHFW letter no. F No. M-12013/2/2015-eGov dated 1<sup>st</sup> December, 2015, the CHI need to setup a National/ Central Coordination Unit and the unit should have technical manpower along with ePMU team. Therefore, following is proposed for initiating the work related to NIN under Centre for Health Informatics:
  - (a) The following structure of ePMU/PMT being proposed through National Institute for Smart Governance (NISG) for the purpose of immediate start of the project.
    - I. Project Lead -- 1 No.
    - II. Consultants -- 2 No.
    - III. Associate Consultants -- 2 No.
  - (b) Necessary sitting space with internet connection and other related infrastructure is required for ePMU Team at CHI. Also, during the 13th meeting of the SCNHP held on 7/12/15, The SCNHP suggested that due to further space constraints in NIHFW premises, suitable space may be rented outside to carry on the expanding work from MoHFW on various eGovernance activities (point 5. (ii), see attached MoM of the meeting)
  - (c) The CHI officials and ePMU team will coordinate with State's / UT's, so necessary telephone connections (initially 3) with conference facility and STD facility would be required.
  - (d) The ePMU Team along with NHP Team will be required to coordinate in various events of eGovernance division of MoHFW like NIN and other eGovernance related work on daily basis. Therefore one dedicated vehicle is required for the transportation of officials.
2. Further, it is requested to constitute a committee under the chairmanship of AS (eGov) for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN, across India as approved in the meeting held on 23rd November, 2015 at Nirman Bhavan, New Delhi under the chairmanship of AS (eGov).

Submitted for kind approval of a, b, c, and d. This has the approval of Director, NIHFW.

*Ankit Tripathi*  
(Ankit Tripathi) 15/12/15

Additional Director

Email: [at@nihfw.org](mailto:at@nihfw.org), Ph. 011-26165959, Mob- 7838363525  
Centre for Health Informatics, National Health Portal  
National Institute of Health and Family Welfare (NIHFW)  
Munirka, New Delhi-110067



F No. M-12013/2/2015-eGov  
Government of India  
Ministry of Health & Family Welfare

Nirman Bhawan, New Delhi  
Dated the 1<sup>st</sup> December, 2015

143  
(19)

To  
The Director,  
(Prof J K Das)  
National Institute of Health & Family Welfare  
Baba Gang Nath Marg, New Mehrauli Road  
Munirka, New Delhi-110067

**Subject: Engagement of Centre for Health Informatics for National Identification Number (NIN) implementation in India – reg.**

Sir,


This is with reference to the NIN implementation across India. The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI) / NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20<sup>th</sup> November, 2015.

2. The Centre for Health Informatics will setup a dedicated unit (National Coordination Unit) for the development of software and coordination with State. The unit will also support the State Government/ UT's in the process of NIN implementation in different health related IT applications. The required ePMU team may be hired through NISG for the purpose of immediate start of the project. The manpower provided for the purpose of GIGW Compliance may also be utilized for the same till further orders.

3. CHI will develop the NIN application for generation of NIN and further addition of new health facility, modification of attributes of a facility, disabling of health facility, addition of new attribute etc. The Additional Director, CHI/NHP will be the National Coordinator for NIN implementation across India and handle the overall development apart from his other duties.

All the expenditure will be met from NHP project funds. This has the approval of competent authority.

Yours Faithfully,



(Jitendra Arora)

Director (eGov)

Tele No. 23062317

Copy to:

Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFW.

F No. M-12013/2/2015-eGov  
Government of India  
Ministry of Health & Family Welfare

Nirman Bhawan, New Delhi  
Dated the 1<sup>st</sup> December, 2015

To  
The Director,  
(Prof J K Das)  
National Institute of Health & Family Welfare  
Baba Gang Nath Marg, New Mehrauli Road  
Munirka, New Delhi-110067

**Subject: Engagement of Centre for Health Informatics for National Identification Number (NIN) implementation in India – reg.**

Sir,

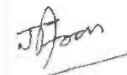
This is with reference to the NIN implementation across India. The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI) / NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20<sup>th</sup> November, 2015.

2. The Centre for Health Informatics will setup a dedicated unit (National Coordination Unit) for the development of software and coordination with State. The unit will also support the State Government/ UT's in the process of NIN implementation in different health related IT applications. The required ePMU team may be hired through NISG for the purpose of immediate start of the project. The manpower provided for the purpose of GIGW Compliance may also be utilized for the same till further orders.

3. CHI will develop the NIN application for generation of NIN and further addition of new health facility, modification of attributes of a facility, disabling of health facility, addition of new attribute etc. The Additional Director, CHI/NHP will be the National Coordinator for NIN implementation across India and handle the overall development apart from his other duties.

All the expenditure will be met from NHP project funds. This has the approval of competent authority.

Yours Faithfully,

  
(Jitendra Arora)  
Director (eGov)  
Tele No. 23062317

Copy to:

Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFW



Receipt No : 487754/2017/E-GOVERNANCE

Subject: **Requesting to organise a meeting between MoHFW and IIB**  
To: shobha.mishra@fikki.com  
Cc: dir.ehealth@gmail.com, amitkumariss34@gmail.com,  
chandrasens@deloitte.com

Date: 12/29/15 12:34 PM

From: "Ashish Sharma" &lt;ashish.sharma91@gov.in&gt;

144  
⑦

Respected Madam,

Shri Sunil Sharma , JS (e-Governance), MoHFW along with other officials from Ministry attended the recently organised FICCI 8th Annual Health Insurance Conference; 'Creating Value through Customer Centricity', during 9-10 December 2015.

2. During the course of the conference it came to the knowledge that the Insurance Information Bureau (IIB) of India has launched a registry of 32651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlement.
3. With a similar objective, MoHFW is also in the process of assigning unique National Identification Number (NIN) to all health facilities in India which is a 10 digit number.
4. In this context, you are requested to organize a meeting between MoHFW and IIB to understand the system of ROHINI beforehand to evaluate convergence of efforts and address potential changes.

Regards

Ashish Sharma  
Assistant Section Officer (e-Governance)  
MoHFW  
Ph: 23062263

14  
16**A brief Note - ROHINI (Registry of Hospitals in Network of Insurance)**

Claim settlement is one of the most important services that an insurance company provides to its customers. Insurance companies have an obligation to settle claims promptly and apprise consumers in terms of progress w.r.t. their claims. ROHINI has been launched in order to streamline the insurance claim process by ensuring their early dispensation driven by notified guidelines

1. ROHINI (Registry of Hospitals in Network of Insurance) is a registry of unique hospitals in the Health Insurers and Third Party Administrators (TPAs) network. The registry has been developed by the Insurance Information Bureau of India (IIB) (promoted by Insurance Regulatory Development Authority of India & Ministry of Commerce) in collaboration with GS1 India, to provide hospitals a 13 digit globally unique ID with Geo code mapping to ease inefficiencies in claim settlements.
2. This will be facilitated by virtue of Hospital Self Service Portal allowing hospitals to register and edit information thus enabling electronic exchange of medical records between hospitals and insurance companies to ensure faster claims processing, consumers will be also provided access to hospitals database and their respective medical records related to insurance claims.
3. The portal will facilitate national, state and regional level analytical reporting on healthcare aspects like geography based trends, patterns of disease occurrence , cost of claims , pattern of claims & cost of treatment which will help determine standardized treatment costs.
4. ROHINI will help avoid duplication since every hospital will have one unique identity number. Also, alerts would be sent to Insurers and third party administrators for any changes in the registry (new hospitals added, changes in the coordinates of an existing hospital, etc.)
5. Future enhancements will be made to the registry with attributes like number of beds, specialization, details of doctors, classification/ categorization of these hospitals into clinics, hospitals, diagnostic centres among others, based on the feedback from the stakeholders, their evolving needs and their experience in the initial phases. Public can choose the hospitals based on their location preferences, specialties, empanelment of hospitals with insurance companies thus enabling insurers to get access to authentic and de-duplicated registry and providing regulatory body a glimpse into pattern of claims, cost of claims and cost of treatment.
6. The website may be accessed by visiting URL <http://rohini.iib.gov.in/>

Receipt No : 487754/2017/E-GOVERNANCE

Subject: **Minutes of the meeting for National Identification Number (NIN) held on 23rd November, 2015 at Nirman Bhavan, New Delhi**

Date: 12/02/15 03:57 PM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;

To: Deepti &lt;deepti.srivastava@nic.in&gt;,

Sunil Kumar <sunil.bhushan@gov.in>, ankit\_tripathi11@hotmail.com,  
Suparna <suparna@gov.in>, dr.amitmishra@gmail.comCc: asfnd.kb@gmail.com, sunil.sharma62@gov.in,  
dir.ehealth@gmail.com, sunita.dhaundiyal@nic.in

NIN minutes 23.11.15.pdf (935kB)

Sir / Mam,

The meeting for the **National Identification Number (NIN)** of health facilities of India was **held on 23<sup>rd</sup> November, 2015** at 4:00 P.M. in the Room No.152, A –Wing, Nirman Bhawan, Ministry of Health and Family Welfare under the Chairmanship of Shri K.B Agarwal, Additional Secretary (eGov), MoHFW to discuss the progress of the generation of NIN of health facilities of India.

Please find attached the approved minutes of the same.

Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health &amp; Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011

Tel: 011 – 2306 2263

Mobile: 9582861973



138  
14

Government of India  
Ministry of Health and Family Welfare  
Department of Health and Family Welfare  
e-Governance Division  
\*\*\*\*\*

Dated: 23 November, 2015

**Subject: Minutes of the meeting for National Identification Number (NIN) held on 23<sup>rd</sup> November, 2015 at Nirman Bhavan, New Delhi**

The meeting for the **National Identification Number (NIN)** of health facilities of India was held on **23<sup>rd</sup> November, 2015** at 4:00 P.M. in the Room No.152, A -Wing, Nirman Bhawan, Ministry of Health and Family Welfare under the Chairmanship of Shri K.B Agarwal, Additional Secretary (eGov), MoHFW to discuss the progress of the generation of NIN of health facilities of India. The list of participants is placed at **Annexure - A**.

2. Additional Secretary (eGov) welcomed the participants. The meeting was started with discussion on the progress of NIN generation and validation for the health facilities in Goa.
3. It was informed that NIC had provided the source code of NIN generation application to NHP on 20<sup>th</sup> November, 2015 for further development as per the requirement of the NIN~~244~~ project. A detailed deliberation was held regarding future road map of NIN implementation in India.
4. It was discussed to constitute a committee under the chairmanship of AS (eGov) for providing strategic and technical guidance to Centre for Health Informatics (CHI) to implement the project. A National/ Central coordination unit will be setup in Centre for Health informatics for the generation, verification and seeding of NIN to all health facilities. The Additional Director, CHI will manage the overall development & implementation of NIN project.
5. It was also discussed that CHI will develop the NIN software and should provide all technical support for generation and implementation of NIN to all health facilities of India (including private health facilities). For generation of NIN, the database of health facilities from Mother & Child Tracking System will be used.
6. The NHSRC will handle the process of validation of NIN at state level. Dr. Amit Mishra, Sr. Consultant, NHSRC should provide the list of attributes need to be captured at health facility level.
7. The integration of NIN with HMIS system was also discussed in the meeting. The CHI/ NHP should provide the technical manpower and further support for interlinking of NIN with HMIS database of Health facilities (including geo-tagging of NIN).

(13)

8. The timeframe of the NIN project was discussed in detail. The following timeline was fixed for the generation and implementation of NIN to all health facilities of India:

**(I) Timeline: 31<sup>st</sup> March 2016**

S.No.	Facility Type	Coverage (%) (approximate)
1.	Govt. Health Facilities	90%
2.	Private Health Facilities	50%

**(II) Timeline: 31<sup>st</sup> December 2016**

S.No.	Facility Type	Coverage (%) (approximate)
1.	Govt. Health Facilities	100%
2.	Private Health Facilities	60%

The meeting ended with vote of thanks to the chair and the participants.

\*\*\*



136

(12)

## Annexure A

List of Participants attended the meeting of the NIN held on 23<sup>rd</sup> November, 2015.

1. Shri K.B Agarwal, Additional Secretary, MoHFW.
2. Shr. Sunil Kumar, Sr. Technical Director, NIC
3. Smt. Deepti Shrivastava, Director (Stats), MoHFW
4. Shri. Ankit Tripathi, Additional Director, CHI, NIHFW
5. Smt. Suparna Bhatnagar, SSA, NIC
6. Dr. Amit Mishra, Sr. Consultant, NHSRC

Receipt No : 487754/2017/E-GOVERNANCE

Subject: **Engagement of Centre for Health Informatics for National Identification Number (NIN) implementation in India - reg**

To: director@nihfw.org, supten@nihfw.org, supten@gmail.com,  
ankit\_tripathi11@hotmail.com

Cc: Jitendra Arora <dir.ehealth@gmail.com>

Date: 12/02/15 04:09 PM

From: "Amit Kumar" &lt;amit.k89@gov.in&gt;

Engagement of CHI for NIN implementation.pdf (458kB)

Sir,

This is with reference to the NIN implementation across India. The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI) / NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

Please find attached the letter in this context.

Regards

Amit Kumar

Assistant Director (eGovernance)

Ministry of Health & Family Welfare

Room No. 425C

Nirman Bhawan

New Delhi – 110 011

Tel: 011 – 2306 2263

Mobile: 9582861973

+34 (10)

F No. M-12013/2/2015-eGov  
Government of India  
Ministry of Health & Family Welfare

Nirman Bhawan, New Delhi  
Dated the 1<sup>st</sup> December, 2015

To  
The Director,  
(Prof J K Das)  
National Institute of Health & Family Welfare  
Baba Gang Nath Marg, New Mehrauli Road  
Munirka, New Delhi-110067

**Subject: Engagement of Centre for Health Informatics for National Identification Number (NIN) implementation in India – reg.**

Sir,

This is with reference to the NIN implementation across India. The Ministry of Health and Family Welfare has initiated a process for generating National Identification Number of all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI) / NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20<sup>th</sup> November, 2015.

2. The Centre for Health Informatics will setup a dedicated unit (National Coordination Unit) for the development of software and coordination with State. The unit will also support the State Government/ UT's in the process of NIN implementation in different health related IT applications. The required ePMU team may be hired through NISG for the purpose of immediate start of the project. The manpower provided for the purpose of GIGW Compliance may also be utilized for the same till further orders.

3. CHI will develop the NIN application for generation of NIN and further addition of new health facility, modification of attributes of a facility, disabling of health facility, addition of new attribute etc. The Additional Director, CHI/NHP will be the National Coordinator for NIN implementation across India and handle the overall development apart from his other duties.

All the expenditure will be met from NHP project funds. This has the approval of competent authority.

Yours Faithfully,

  
(Jitendra Arora)  
Director (eGov)

Tele No. 23062317

✓  
**Copy to:**  
Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFW.

Receipt No : 487754/2017/E-GOVERNANCE

mail - Fwd: FW: Meeting regarding NIN implementation

<https://mail.google.com/mail/u/0/?ui=2&ik=cb06f549df&view=pt&sea...>

Ashish Sharma &lt;ashish.sharma.css@gmail.com&gt;

**Fwd: FW: Meeting regarding NIN implementation**

1 message

Amit Kumar &lt;amitkumariss34@gmail.com&gt;

Thu, Nov 19, 2015 at 10:05 AM

To: Ashish Sharma &lt;ashish.sharma.css@gmail.com&gt;

----- Forwarded message -----

From: **Jitendra Arora** <dir.ehealth@gmail.com>

Date: Wed, Nov 18, 2015 at 7:19 PM

Subject: Fwd: FW: Meeting regarding NIN implementation

To: Amit Kumar &lt;amitkumariss34@gmail.com&gt;

Put on file

Regards

Jitendra Arora

Director(eHealth)

Ministry of Health and Family Welfare

Nirman Bhawan (Room 307D)

New Delhi - 110108.

+91-11-23062317 (Telefax),

+91-9868453680(Mobile)

----- Forwarded message -----

From: **ANKIT TRIPATHI** <ankit\_tripathi11@hotmail.com>

Date: Sun, Nov 15, 2015 at 9:12 PM

Subject: FW: Meeting regarding NIN implementation

To: Jitendra Arora MoHFW &lt;dir.ehealth@gmail.com&gt;, "Jitendra Arora- Gov.in" &lt;jitendra.arora@gov.in&gt;

Cc: Sunil Bhusan NIC &lt;sunil.bhushan@gov.in&gt;

Dear Sir,

This is in reference to the NIN implementations. As per the directions of the AS(KBA), we need to start the the process of NIN implementation from GOA and subsequently W.Bengal as soon as possible. In this regard, a meeting was held with Sh. Sunil Kumar, Sr. Technical Director, NIC on 6th November 2015 at NIC HQ (See detail minutes of the meeting in the email trail below).

Therefore, it is requested to kindly give us a formal approval from MoHFW to start the NIN implementation from GOA.

Submitted for necessary action at your end, please.

Best regards,

Ankit Tripathi

Additional Director

Centre for Health Informatics of National Health Portal,

Receipt No : 487754/2017/E-GOVERNANCE

mail - Fwd: FW: Meeting regarding NIN implementation

<https://mail.google.com/mail/u/0/?ui=2&ik=cb06f549df&view=pt&sea...>

NIHFW, Ministry of Health and Family Welfare, New Delhi-110067

Phone: +91-11-26165959 - (Ext.- 264)

Mobile: +91-7838363525

Email: at@nihfw.org, ankit\_tripathi11@hotmail.com

From: sunil.bhushan@gov.in

To: ankit\_tripathi11@hotmail.com; supten@gmail.com

CC: suparna@gov.in; asfnd.kb@gmail.com; sunil.bhushan@nic.in

Date: Fri, 6 Nov 2015 12:47:57 +0530

Subject: Re: Meeting regarding NIN implementation

Dear Ankit,

This has reference to our meeting held today (06/11/2015) this morning. Following points were discussed for implementation of NIN2HFI project in States:

1. Letter from AS(eGov) has been sent to Commissioner, Health, Goa and copy of the same is attached for your reference. You may take up with Commissioner, Health, Goa for early verification of Health Facilities. NIC officers are also in touch with Health Department, Goa for providing technical help in this regard.
2. NIC-HID will generate NIN for all Health Facilities of India based on MCTS data with Generation, Verification, Confirmation and Viewing facility and give it to NHP for its verification from respective states. NHP needs to coordinate with all states in this regard for early action.
3. NIC will handover NIN2HFI software and database along with source code to NHP/CHI for customization and hosting. Ownership of this application will be with MoHFW through NHP/CHI. NIC will handover the same latest by 20/11/2015.
4. NHP/CHI will document processes required for making NIN fully functional. These processes may include Addition of New Health Facility, Modification of Attributes of a facility, Disabling of Health Facility, Addition of new attribute etc. Once these processes are approved by AS(eGov), then required software will be developed and maintained by NHP/CHI.
5. A committee under the chairmanship of AS(eGov), MoHFW may be formed for approval of processes, monitoring of progress and issuance of guidelines for states.

Sh Ankit Tripathi, Additional Director, NHP/CHI is requested to interact with Ms Suparna Bhatnagar, SSA, NIC-HID for further action on above issues.

With regards,

Sunil Kumar

Copy of the above is being sent to

1. Sh K B Aggarwal, AS(eGov, Food & Drug), MoHFW for kind information.
2. Sh Supten Sarbadhikari, Project Director, NHP/CHI with a request to take further action on the above in consultation with AS(eGov), MoHFW.

On 11/06/15 10:21 AM, **ANKIT TRIPATHI** <ankit\_tripathi11@hotmail.com> wrote:

Receipt No : 487754/2017/E-GOVERNANCE

mail - Fwd: FW: Meeting regarding NIN implementation

<https://mail.google.com/mail/u/0/?ui=2&ik=cb06f549df&view=pt&sea...>

7

Sir,  
I am on the way and will reach in 10 minutes.

Sent from Outlook

On Thu, Nov 5, 2015 at 5:26 PM -0800, "सुनील कुमार" &lt;sunil.bhushan@gov.in&gt; wrote:

Please come to CGO at 10:30am.


आदर सहित  
सुनील कुमार

On 5 Nov 2015 21:03, ANKIT TRIPATHI &lt;ankit\_tripathi11@hotmail.com&gt; wrote:

Dear Sir,  
Kindly give some time tomorrow morning for the discussion regarding NIN  
(Preferably between 10 to 11 AM).  
I have received a call from AS (KBA) in the evening for the same to start work on  
urgent basis.

Best regards,  
Ankit Tripathi

--  
सुनील कुमार Sunil Kumar  
वरिष्ठ तकनीकी निदेशक Senior Technical Director  
राष्ट्रीय सूचना-विज्ञान केन्द्र National Informatics Centre  
भारत सरकार Government of India  
मोबाइल: +९१-९८१०९०१३०२ Mobile: +91-9810901302  
कार्यालय दूरभाष : +९१-११-२४३०५७६० Land Line O : +91-11-24305760  
ई-मेल E-mail : sunil.bhushan@nic.in

 NATIONAL IDENTIFICATION NUMBER TO HEALTH FACILITIES OF INDIA(NI.pdf  
324K

Receipt No : 487754/2017/E-GOVERNANCE

के बी अग्रवाल  
अपर सचिव भा.प्र.से.

**B Agarwal**  
IAS  
Additional Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
Government of India  
Ministry of Health & Family Welfare

Dated :- 05-11-2015

Subject: National Identification Number to Health Facilities of India (NIN-2-HFI).

Dear Dr. Sharat,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number with in India. In order to identify the geographic location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added whenever required.

NIC has developed an application module to generate NIN-2-HFI. End-users will be able to confirm by giving NIN through central database and will display its available attributes, if found correct. This site is developed to confirm and verify the existence of the facility.

MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number therefore verification of health facilities and their attributes is very much required. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

NIN-2HFI application is available at <http://nrhm-mcts.nic.in/nin2hfi> website. State and District users enrolled in MCTS users will be able to login to the site with their MCTS credentials. These users have been assigned to verify and confirm the facility existence. User manual for this application is available to the users once they login successfully.

I would request you to complete this task of Health Facilities verification of Goa within 10 days. Based on this pilot implementation for the State of Goa, we will replicate this application in remaining states for national level database, which will be available to all states for consumption in their health application.

With regards,

Yours Sincerely

  
(K B Agarwal)

**Dr. Sharat Chauhan**  
Commissioner & Secretary(Health & FW)  
Government of Goa,  
Secretariat, Porvorim,  
Goa-403521

Tel. : 011-23061887  
011-23061108

e-mail : [asfnd.kb@gmail.com](mailto:asfnd.kb@gmail.com)  
Nirman Bhawan, New Delhi-110011



Gmail - Progress review meeting regarding allocation of National Identity Number (NIN) ... Page 1 of 2



Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

**Progress review meeting regarding allocation of National Identity Number (NIN) to all Health Facilities in India**

Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Fri, Oct 23, 2015 at 7:22 PM

To: deepthi.srivastava@nic.in, Alok Kumar Verma <alokkumar.verma@nic.in>, Sunil Kumar <sunil.bhushan@gov.in>, Amit Mishra <amit.mishra@nhsrcindia.org>, Sunita Dhaundiyal <Sunitadhaundiyal@gmail.com>, Amit Kumar <amitkumariss34@gmail.com>, "Shrivastava, Chandrasen (IN - Delhi)" <chandrasens@deloitte.com>, Nikhil Malhotra <nimalhotra@deloitte.com>, Manoj Saxena <manoj.saxena@nic.in>

Cc: Agarwal K B AS <asfnd.kb@gmail.com>, sunil.sharma62@gov.in

Sir/ Madam,

It is informed that, different states have been developing/ implementing different Hospital Information System (HIS) solutions and other health related software. Each of the softwares uses different codes for Health Facilities. Softwares like Mother & Child Tracking System (MCTS) and Health Management Information System (HMIS) are using different codes for health facilities.

2. To bring standardization and inter-operability among these softwares, Ministry of Health & Family Welfare has initiated a process to assign National Identity Number to Health Facilities in India (NIN-2-HFI). This National Identity Number (NIN) will be used in all the softwares. An email in this regard was sent to DeitY on 12.10.2015.

3. A meeting has been convened under the Chairmanship of Shri K.B. Agarwal, Additional Secretary on 27.10.2015 at 5:00 P.M. in his chamber to review the progress and work out the strategy for future course of implementation of NIN in all the IT healthcare applications.

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.

VS (ehow)  
28/10/15  
AD(eGov)

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=sent&msg=1...> 10/24/2015

Gmail - Progress review meeting regarding allocation of National Identity Number (NIN) ... Page 2 of 2

+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

+28 (4)

----- Forwarded message -----

From: **KB Agarwal** <asfnd.kb@gmail.com>

Date: Mon, Oct 12, 2015 at 3:46 PM

Subject: Allocation of National Identity Number (NIN) to all Health Facilities in India

To: kbhatia@gov.in, asegov@deity.gov.in

Cc: Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Sir/Madam,

As you know, Ministry of Health & Family Welfare has already drafted Meta Data and Data Standards (MDDS) for Health Sector. MDDS for health sector will not only bring standardisation among the application software being developed and implemented but also make them interoperable.

Different states have been developing/implementing different Hospital Information System (HIS) solutions and other health related software. Each of the softwares uses different codes for Health Facilities. Our own softwares like Mother & Child Tracking System (MCTS) and Health Management Information System (HMIS) are using different codes for health facilities. This is causing problem in bringing standardization and inter-operability among these softwares. In order to address this problem, Ministry of Health & Family Welfare has no option but to assign National Identity Number to Health Facilities in India (NIN-2-HFI). This National Identity Number (NIN) will be used in all the softwares. The logic for NIN-2-HFI is attached. NIC will help us technically in assigning codes as per the logic given. States will verify the data related to Health Facilities and its attributes.

May I request you to comment on the logic being proposed so that process of assigning National Identity Number to Health Facilities in India (NIN-2-HFI) is initiated immediately?

**(K B Agarwal)**

AS(eGov), MoHFW

 **Annexure- Proposed ID Structure.doc**  
30K

<https://mail.google.com/mail/u/0/?ui=2&ik=00e5124358&view=pt&search=sent&msg=1...> 10/24/2015



Amit Kumar &lt;amitkumariss34@gmail.com&gt;

3

**Fwd: Allocation of National Identity Number (NIN) to all Health Facilities in India**

1 message

Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Fri, Oct 23, 2015 at 4:59 PM

To: Sunita Dhaundiyal &lt;Sunitadhaundiyal@gmail.com&gt;, Amit Kumar &lt;amitkumariss34@gmail.com&gt;

Regards

Jitendra Arora  
Director(eHealth)  
Ministry of Health and Family Welfare  
Nirman Bhawan (Room 307D)  
New Delhi - 110108.  
+91-11-23062317 (Telefax),  
+91-9868453680(Mobile)

----- Forwarded message -----

From: **KB Agarwal** <asfnd.kb@gmail.com>

Date: Mon, Oct 12, 2015 at 3:46 PM

Subject: Allocation of National Identity Number (NIN) to all Health Facilities in India

To: kbhatia@gov.in, asegov@deity.gov.in

Cc: Jitendra Arora &lt;dir.ehealth@gmail.com&gt;

Sir/Madam,

As you know, Ministry of Health & Family Welfare has already drafted Meta Data and Data Standards (MDDS) for Health Sector. MDDS for health sector will not only bring standardisation among the application software being developed and implemented but also make them interoperable.

Different states have been developing/implementing different Hospital Information System (HIS) solutions and other health related software. Each of the softwares uses different codes for Health Facilities. Our own softwares like Mother & Child Tracking System (MCTS) and Health Management Information System (HMIS) are using different codes for health facilities. This is causing problem in bringing standardization and inter-operability among these softwares. In order to address this problem, Ministry of Health & Family Welfare has no option but to assign National Identity Number to Health Facilities in India (NIN-2-HFI). This National Identity Number (NIN) will be used in all the softwares. The logic for NIN-2-HFI is attached. NIC will help us technically in assigning codes as per the logic given. States will verify the data related to Health Facilities and its attributes.

May I request you to comment on the logic being proposed so that process of assigning National Identity Number to Health Facilities in India (NIN-2-HFI) is initiated immediately?


(K B Agarwal)

Receipt No : 487754/2017/E-GOVERNANCE

10/6 (2)

AS(eGov), MoHFW

---

 **Annexure- Proposed ID Structure.doc**  
30K

①  
①26

Annexure-I

**Subject:** To allocate National Identity Number to each Health Facility of India.

**Definition:**

- ✓ Health Facility means all Government, Private including allopathic, Ayurveda, Homeopathy, Sidha, Unani, Yoga Hospitals, clinics, diagnostic laboratories, blood banks etc.

**Proposes ID Structure:**

- ✓ It will be 10 Digit Unique Number given to each Health Facility.
- ✓ 9 digits will be a random number followed by 1 digit check-sum number
- ✓ First digit will never be 0.

**Minimum Attributes to be captured**

- ✓ State
- ✓ District
- ✓ Sub-District
- ✓ Village/Ward/Town/City
- ✓ Government/Semi-Government/Private
- ✓ Area: Rural/Urban
- ✓ Address

**Action Plan:**

- ✓ Verification of data related to Health Facilities from different sources.
- ✓ Allocation of National Identity Number (NIN) to each Health Facility of India (HFI) as per approved scheme.
- ✓ All health facilities of the country will display this number on the main gate of their facility.
- ✓ All software of Health Sector (Central, State, Private) and manual data will be using this number for the purpose of integration.
- ✓ Use of NIN-2-HFI in all existing software especially HIS.
- ✓ Integration with Clinical Establishment Registration & Regulation System (CERRS).





भारत सरकार  
GOVT. OF INDIA  
चिकित्सा अधीक्षक का कार्यालय  
**OFFICE OF THE MEDICAL SUPERINTENDENT**  
वी.एम.एम. कॉलेज एवं सफदरजंग अस्पताल  
V.M.M.C. & SAFDARJUNG HOSPITAL,  
नई दिल्ली-110029. NEW DELHI-110029

34  
SPECIAL MESSENGER

No. SERVER ROOM / Mera Aspataal / 17-960-A

dt.15.2.2017

To  
Sh. Manoj Jhalani  
Joint Secretary(P) & CVO  
Govt. of India  
MOHFW  
Nirman Bhavan, New Delhi

Office of Joint Secretary (SS)  
JTS no. 473080/17  
Date 22/2/17

Sub: Implementation of 'Mera Aspataal' application & NIN system format – reg.

Sir,

With reference to file No.P-17029/33/2016-NRHM-IV dt.25.1.2017 & D.O.No. P-17029 / 33 /2016-NRHM-IV dt.5.12.2016, please find enclosed the details of the NIN for Safdarjung hospital in the desired format.

Also enclosed is the ORS appointment list for this hospital from 1<sup>st</sup> January, 2017 till 13.2.2017 so that feed back from patients regarding Mera Aspataal application can be obtained. Patients who had actually visited the hospital are duly marked in the lists enclosed.

For kind information & necessary action,

Yours sincerely,

**Dr.(Prof.) A.K. RAI**  
Medical Superintendent &  
Nodal Officer – NIN

Copy to :

- ✓ 1. Mr. Sunil Sharma, JS(e-Gov.), MOHFW, Nirman Bhavan, New Delhi
2. Mr. Sudhir Kumar, JS(CGH), MOHFW, Nirman Bhavan, New Delhi
3. Mr. Nisarg Desai, Consultant (PHP &P), MOHFW, Nirman Bhavan, New Delhi
4. Ms. Sunita Sharma, Director (NHM IV), MOHFW, Nirman Bhavan, New Delhi

*Sur(e-gov)*

*22/2/17*

*AD (CHI)*  
*AD (eHealth)*



## NIN SYSTEM FORMAT

Facility Name	VMMC & Safdarjung Hospital
State	Delhi
District	South West
Taluka	Delhi
Block	Delhi
Facility Type	Tertiary Health Care Services
Latitude	28.569
Longitude	77.2067
Altitude	699 Feet
House Number	NA
Street	AIIMS CROSS ROADS
Land Mark	AIIMS Flyover
Locality	Ring Road – Opp. To AIIMS
Pin Code	110029
Landline	011-26265060
In-charge Mobile	9599955201
E-mail	<a href="mailto:msoffice@vmmc-sjh.nic.in">msoffice@vmmc-sjh.nic.in</a>
Region Indicator	
Operational Status	Working under DGHS-MOHFW
Ownership Authority	DGHS-MOHFW, Govt. of India





अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)  
 All India Institute of Medical Sciences, Raipur (Chhattisgarh)  
 Tatibandh, GE Road,  
 Raipur-492 099 (CG)  
[www.aiimsraipur.edu.in](http://www.aiimsraipur.edu.in)

No. Admin/MoHFW/AIIMS.RPR/5055

Date 23 February 2017

To,  
 Shri Jitendra Arora,  
 Director (eHealth),  
 Ministry of Health and Family Welfare,  
 Nirman Bhawan (Room 307 D),  
 New Delhi, PIN- 110108.

Sub:- National Identification Number (NIN) Portal-regarding.

Ref: - In reference to your letter F. No. Z-18015/1/2016-eGov, Govt. of India, MoHFW, 307 D, Nirman Bhawan, New Delhi dated 02-02-2017.

Dear Sir,

This is in reference to your letter dated 02-02-2017 addressed to the Director, AIIMS, Raipur regarding above subject.

In this connection, I am directed to inform that AIIMS, Raipur has nominated the following faculty member as Nodal Officer for the said purpose:

1. Dr. Shreemanta Kumar Dash, Deputy Medical Superintendent, AIIMS, Raipur.  
 Mobile No. 08518881795, E mail [ID-kumardash2005@gmail.com](mailto:ID-kumardash2005@gmail.com).

This is for your kind perusal and necessary action.

Thanking You,

*AD/CHIEF*  
*AD/ehw*

Yours faithfully,

*[Signature]*

(Ramawatar Patel)

Senior Administrative Officer,  
 AIIMS, Raipur

**Copy for information to:-**

1. Director, AIIMS, Raipur.
2. Medical Superintendent, AIIMS, Raipur.
3. Deputy Director (Administration), AIIMS, Raipur.
4. HoD, D/o Forensic Medicine and Toxicology, AIIMS, Raipur, for information.
5. Dr. Sreemanta Kumar Dash, Deputy Medical Superintendent, AIIMS, Raipur for information with request to do the same as per attached enclosed format.
6. Office Copy.

**POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION AND RESEARCH,  
CHANDIGARH**

ESTABLISHMENT BRANCH - II



PH- 0172-2755503, 2755509

**OFFICE ORDER**

The Government of India, Ministry of Health & Family Welfare vide D.O. No. Z-18015/1/2016-eGov., dated 02.02.2017 has intimated that the MoH&FW has initiated a process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard, a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts are given user rights to add and update facilities and their details. All current and prospective public health information system will use NIN in their facility masters for easy integration of systems and exchange of data. It is also expected that NIN system will act as single source of truth with respect to health facility related information in India.

As per directions of the Ministry, Dr. Pankaj Arora, Assistant Professor, Deptt. of Hospital Administration is hereby nominated as Nodal Officer, for providing the details in respect of PGIMER, Chandigarh in the format, circulated by the Ministry vide D.O. dated 02.02.2017(copy enclosed).

Dated, Chandigarh, the,  
20<sup>th</sup> February, 2017

**DIRECTOR  
PGIMER, CHANDIGARH**

Endst. No. PGI-MA-2017/F-014/181

Dated:- 17/03/2017

A copy is forwarded to the following for information and necessary action:-

- ✓ 1. Sh. Jitendra Arora, Director, Govt. of India, Ministry of Health & Family Welfare, 307-D, Nirman Bhavan, New Delhi - 110011 w.r.t. to e-mail dated 02.03.2017.
2. Dr. Pankaj Arora, A.P.H.A., Deptt. of Hospital Administration, PGIMER, Chandigarh.
3. The System Analyst, PGIMER, Chandigarh.
4. PPS/PA to DDA/DPGI for kind information of DPGI/DDA.

*Ad (e luv)*

*13/17*

*RP Singh*  
Sr. Administrative Officer (I)





GOVERNMENT OF INDIA  
ALL INDIA INSTITUTE OF HYGIENE & PUBLIC HEALTH  
110, CHITTARANJAN AVENUE, KOLKATA-73.  
Telephone: 033-2241-2860/3831, 2257-1048/1049, 2241-3954, 2219-7848  
Fax:- 033-2241-8717/0975/2888, E-mail-aiihph@cal.vsnl.net.in

File No. ACAD.6-7/2017

Date:- 24.02.2017

OFFICE ORDER

In reference to Government of India, Ministry of Health & Family Welfare, 307-D, Nirman Bhawan, New Delhi letter No. Z-18015/1/2016-eGov dated 02.02.2017 regarding Process for providing unique identification number (National Identification Number) for all health facilities in India. In this regard a national portal (<http://nin.nhp.gov.in>) is launched where all public health facilities are allocated National Identification Numbers. The states and districts are given user rights to add and update facilities and their details. In this connection, Director is pleased to nominate Dr. Sanjoy Kumar Sadhukhan, Professor of Public Health Administration as Nodal Officer. (Mobile No.09836287874, E.Mail: sdknsanjay@gmail.com)

Additional Director  
AIIH&PH, Kolkata:-73

File No. ACAD.6-7/2017

Date:- 24.02.2017

Copy for information and Necessary action to:-

1. Dr. Sanjoy Kumar Sadhukhan, Professor of Public Health Administration, Mobile No. 09836287874, E.Mail: sdknsanjay@gmail.com.
- ✓ 2. Mr. Jitendra Arora, Government of India, Ministry of Health & Family Welfare, 307-D, Nirman Bhawan, New Delhi-110011, Tel No. 011-23062317, E-mail: dir.ehealth@gmail.com
3. P.S. to the Director.
4. All HODs/Centre

Additional Director  
AIIH&PH, Kolkata:-73

AD (CHT)  
AD (e Gov)

AD (e Gov)  
27/3/17





भारत सरकार / GOVERNMENT OF INDIA

जवाहरलाल स्नातकोत्तर आयुर्विज्ञान शिक्षा एवं अनुसंधान संस्थान (जिपमेर)  
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय के अधीन राष्ट्रीय महत्व का संस्थान)  
धनवंतरी नगर, पुदुच्चेरी - 605 006



**JAWAHARLAL INSTITUTE OF POSTGRADUATE MEDICAL EDUCATION AND RESEARCH (JIPMER)**  
(An Institution of National Importance under Ministry of Health & Family Welfare)  
**Dhanvantri Nagar, Puducherry - 605 006.**

दूरभाष / Phone : (0413) 2272380 / 82 / 85 / 86, 2296000, 2272132 & 2272337, फैक्स / Fax : 0413 - 2272066 / 67 & 2272735  
ई-मेल / E-mail : jipmer@jipmer.edu.in, वेबसाइट / Website: www.jipmer.edu.in

विभाग / DEPARTMENT : O/o. the Nodal Officer

सं. / No. JIP/Nodal Officer/Misc./2017 /02

दिनांक / Date: 3 APR 2017

To  
Shri. Jitendra Arora,  
Director,  
Government of India,  
Ministry of Health & Family Welfare,  
307-D, Nirman Bhawan,  
New Delhi - 110 108.

Sub: Providing unique Identification number (National Identification Number) for all health facilities in India - Reg.

Ref: Ministry letter No.Z-18015/1/2016-eGov dated:02.02.2017.

\*\*\*\*\*

Sir,

With reference to the letter cited above, the requisite information pertains to JIPMER, Puducherry regarding "Providing unique Identification number (National Identification Number) for all health facilities in India" is furnished in the prescribed format.

Facility Name	JIPMER, PUDUCHERRY
State	PUDUCHERRY U.T.
District	PUDUCHERRY U.T.
Taluka	PUDUCHERRY U.T.
Block	OULGARET
Facility Type	PUBLIC HOSPITAL
Latitude	11°57'17" N
Longitude	79°47'54" E
Altitude	100m ASL
House Number	-
Street	KAMARAJ SALAI
Landmark	GORIMEDU
Locality	DHANVANTRI NAGAR
Pincode	605 006
Landline	0413 - 2272380, 2272389
In-Charge Mobile	Dr. S.C. PARIJA, DIRECTOR - 9443999511
Email	director@jipmer.edu.in
Region Indicator	SOUTH INDIA
Operational Status	FUNCTIONING
Ownership Authority	CENTRAL GOVT., MINISTRY OF HEALTH & FAMILY WELFARE, GOVT. OF INDIA

This is issued with the approval of the Director.

Yours faithfully,

(Dr. G.K.PAL)

Nodal Officer,

JIPMER, Puducherry - 6.

स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
के नोडल अधिकारी / Nodal Officer to  
Min. of Health & Family Welfare,  
जिपमेर / JIPMER  
पुदुच्चेरी / Puducherry - 605 006

AD (CHI)

AD (eGov)

गीतन  
10/4/17





GOVERNMENT OF INDIA  
DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

File No. 5-1/2016-RMLH(HA-I)/ 4901

Dated: - 19 /04/2017

ORDER

Dr. B.K. Kundu, CMO is hereby appointed as Nodal Officer for entry of details of all central government hospitals in NIN Portal (<http://nin.nhp.gov.in>), which is launched by Ministry of Health & Family Welfare where all public health facilities are allocated National Identification Numbers. A list of all central government hospitals may be compiled in the format given in enclosed letter and shared with Ministry of Health & Family Welfare at the earliest.

This issues with the approval of Medical Superintendent.

Encl: As above

(Shambhu Kumar)  
Dy. Director (Admn.)

To:-

- 1) Dr. Jitendra Arora, Director, Ministry of Health & Family Welfare,  
307-D, Nirman Bhavan, New Delhi – 110 011.
- 2) Dr. B.K. Kundu, CMO

AD (CHT)  
AD/ehw

AD  
21/4/17





**वल्लभभाई पटेल चैस्ट इन्स्टीट्यूट**  
**Vallabhbhai Patel Chest Institute**

दिल्ली विश्वविद्यालय, पोस्ट बॉक्स नं० 2101, दिल्ली-110007  
 University of Delhi, P.O. Box No. 2101, Delhi -110007 (India)

By email: [jitendra.arora@gov.in](mailto:jitendra.arora@gov.in), [hospital2section@gmail.com](mailto:hospital2section@gmail.com)

(BY SPEED POST)

Ref. No. VPCI/Admn-II/2017/ *SP-350*

Date: 16 May 2017

Sh. Jitendra Arora,  
 Director (eHealth),  
 Ministry of Health & Family Welfare,  
 Nirman Bhawan (Room No. 307D),  
 New Delhi-110108.  
 +91-1123062317 (telefax)

*E. 546635/2017*

**Sub: National Identity Number (NIN) – Reg.**

**Ref: 1. Your DO Letter No. Z-18015/1/2016-eGov. Dated 02.02.2017**  
**2. Email dated 03.04.2017**

Dear Sir,

With reference to your email dated 03.04.2017 attaching therein copy of DO Letter dated 02.02.2017 on the above mentioned subject, enclosed please find the Health Facility data in the format as required.

Further, please find below the particulars of Nodal Officer nominated for future communications with the Ministry on the subject matter:

**Name of Nodal Officer:**

**Dr. Vishal Bansal**

**Designation:**

**Assistant Professor,  
 Department of Physiology,  
 VP Chest Institute,  
 University of Delhi,  
 Delhi-110007.**

**Email:**

**[drvishalbansal@hotmail.com](mailto:drvishalbansal@hotmail.com)**

**Phones:**

**Off: 27402406 / Mob: 9810525900**

Thanking you,

Yours faithfully,

(PR Santhanam)  
 Joint Registrar

Encl: a/a.

Cc to: 1. Dr. Vishal Bansal, Assistant Professor, VPCI for information.  
 2. Website division  
 3. Master copy

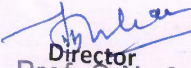
फोन/Tel. : 91-11-27667102  
 91-11-27667441  
 91-11-27667667  
 91-11-27666182

Fax : 91-11-27666549, 27662867  
 E-mail : [admin@vpci.org.in](mailto:admin@vpci.org.in)  
 Website : [www.vpci.org.in](http://www.vpci.org.in)



**Health Facility data**

Facility Name in full	Vallabhbhai Patel Chest Institute (VPCI), University of Delhi
State	Delhi
District	North Delhi
Taluka (Sub-District)	Delhi
Block	Vishwanathan Chest Hospital Block
Facility Type	Super Specialty referral Hospital in Pulmonary Medicine with 128 beds, Respiratory Intensive Care Unit (R.I.C.U.) and round the clock Emergency facilities
Latitude	28.691°
Longitude	77.2083°
Altitude	216 meter
House Number	P. O. Box No. 2101
Street	University of Delhi (North Campus)
Landmark	Vijay Nagar Marg
Locality	University of Delhi
Pin-code	110007
Landline Number (s)	011-27667441; 011-27667420; 011-27666180
In-charge Mobile Number	9811271926
Email id (s)	sngaur@yahoo.com
Region Indicator	Urban
Operational Status	OPD : Monday – Friday; 08.30 AM - 11.00 AM Emergency Services : Round the Clock OPD services of hospital is closed on Govt. Holidays
Ownership Authority	VPCI is maintained institution of University of Delhi & funded by Ministry of Health & Family Welfare, Govt. of India.

  
 Director  
 Prof. S.N. Gaur  
 Acting Director  
 V.P. Chest Institute  
 University of Delhi  
 Delhi-110007



अखिल भारतीय आयुर्विज्ञान संस्थान, पटना  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, PATNA



No. AIIMS/Pat/Admin/2017/815

Dated 29.05.2017

To

Shri Jitendra Arora  
Director  
Ministry of Health & Family Welfare  
307D, Nirman Bhavan  
New Delhi – 110 011.

Sub : National Identification Number – reg.

Sir,

This is with reference to your letter no. Z-18015/1/2016-eGov dated 02.02.2017 regarding the subject cited above.

2. Shri K.P. Bharti, Administrative Officer will be the Nodal Officer from this Institute to administer this issue.

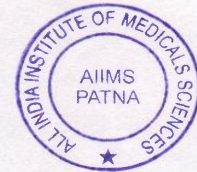
3. As advised, certain details in order to compile a list of all central government hospitals in the process for providing National Identification Number are furnished in the desired format, which is enclosed along with this letter as Annexure 'A'.

Yours sincerely,

Encl : as above

K.P. Bharti  
29/5/17

( K.P. Bharti )  
Administrative Officer



Ad (ch1)  
Ad (ch2)



ANNEXURE 'A'

Facility Name	AIIMS, Patna
State	Bihar
District	Patna
Taluka	Phulwari Sharif
Block	Phulwari Sharif
Facility Type	Hospital & College
Latitude	25.5612° N
Longitude	85.0418° E
Altitude	58 meters
House Number	NIL
Street	NH - 98
Landmark	WALMI
Locality	Phulwari Sharif
Pincode	801 507
Landline	0612 - 2451044
In-charge Mobile	8544213762
Email	<a href="mailto:ao@aiimspatna.org">ao@aiimspatna.org</a>
Region Indicator	
Operational Status	OPD & IPD functional
Ownership Authority	Ministry of Health & Family Welfare

e-office no. 520975/17

F.No. LHMC/1/Nodal Officer (Health Facility)/Admn.I/2017/ 2372

भारत सरकार

GOVERNMENT OF INDIA

स्वास्थ्य सेवा महानिदेशालय

DIRECTORATE GENERAL OF HEALTH SERVICES

लेडी हार्डिंग मेडिकल कॉलेज एवं श्रीमती सुचेता कृपलानी अस्पताल, नई दिल्ली  
LADY HARDING MEDICAL COLLEGE & SMT. S. K. HOSPITAL, NEW DELHI

दिनांक :- 17/4/17

कार्यालय आदेश

Sub:- Nodal Officer in respect of matters relating to the Health Facilities in LHMC &amp; SSK Hospital.

Dr. V.K. Sharma, Addl. M.S. is hereby nominated as Nodal Officer of this Institution for providing the Health Facility data, as per prescribed format, in pursuance of the MoHFW, communication dated 31/03/2017.

To,

Dr. V.K. Sharma,  
Addl. M.S.,  
LHMC.641  
(जगदीश चन्द्र)  
निदेशकCopy to:-

1. Sh. Jitendra Arora, Director (Health), Room No. 307 D, MoHFW, Nirman Bhawan, New Delhi.
2. PS to Director, LHMC.
3. PA to DDA, LHMC.

VS/Arora  
AD(CHE)  
Mr. Sanubh



राष्ट्रीय स्वास्थ्य एवं परिवार कल्याण संस्थान  
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन एक स्वायत्तशासी संस्थान)



The National Institute of Health and Family Welfare  
(An Autonomous Institute under Ministry of Health & Family Welfare, Government of India)

बाबा गंगनाथ मार्ग, मुनीरका, नई दिल्ली-110 067

दूरभाष (कार्यालय): 91-11-26165959, 26166441, 26188485, 26107773

फैक्स: 91-11-26101623, ईमेल: info@nihfw.org

वेब साईट: www.nihfw.org

Baba Gangnath Marg, Munirka, New Delhi-110 067

Phones: 91-11-26165959, 26166441, 26188485, 26107773

Fax: 91-11-26101623, E-Mail: info@nihfw.org

Web Site: www.nihfw.org

File No. NIHFW/CHI/eGov/NIN/2015

Dated : 28<sup>th</sup> August 2017

To

Shri Jitendra Arora  
Director (eHealth), MoHFW  
307- D, Nirman Bhavan,  
New Delhi.

**Subject: Extension of ePMU team hired through NISG – reg.**

Dear Sir,

This is regarding extension of term of Programme Management Unit (PMU) hired through NISG for NIN and eHealth related work.

2. The Centre for Health Informatics has hired 5 manpower through NISG on the basis of approval of MoHFW vide letter no. M-12013/2/2015-eGov dated 07<sup>th</sup> January 2016 for creation of ePMU consisting Project Lead-1, Consultants-2 and Associate Consultants-2. All the ePMU staff hired through NISG are deployed in the CHI/MoHFW for the aforesaid activities. As per agreed terms & conditions with NISG, CHI had released the amount of ₹ 73,47,517/- for a year to NISG on quarterly basis.

3. In the meantime, NISG has raised invoice for 1<sup>st</sup> quarter of 2<sup>nd</sup> year term for human resources deployed for ePMU. It may mentioned that MoHFW vide their letter cited above had not specifically mentioned the period of ePMU team needs to be hired. The anticipated outlay for 2<sup>nd</sup> year towards NISG for ePMU would be ₹ 1,12,63,873/- (approximately).

4. Therefore, it is requested that MoHFW may kindly accord the approval for extension of term of 5 manpower of ePMU for another one year.

With regards,

Yours Sincerely,

(Ankit Tripathi)

Additional Director, CHI

Receipt No : 683210/2017/US(SKP)-e-HEALTH



F.No. Z-18015/1/2016-eGov  
Government of India  
Department of Health & Family Welfare  
(e-Health Section)



Nirman Bhawan, New Delhi  
Dated 28<sup>th</sup> September, 2017

To,

Dr J.K. Das  
Director,  
NIHFW  
Baba Gangnath Marg, Munirka, New Delhi-110067

**Subject: Extension of term of ePMU team hired through NISG-reg**

*plc* **Ref: NIHFW Letter No NIHFW/CHI/eGov/NIN/2015 dated 28<sup>th</sup> August 2017**

Sir,

This is regarding extension of term of 5 manpower of ePMU team hired through NISG for NIN and other eHealth related work assigned to CHI under NIHFW.

2. It is informed that MoHFW has approved extension of ePMU team (Project Lead-1, Consultants-2 and Associate Consultants-2) for a further period of one year.
3. This issues with the approval of JS(e-Health).

Yours faithfully,

(Jitendra Arora)  
Director (e-Health),  
MoH&FW  
Tel-011-23062317

Copy to:

Project Director, CHI, NIHFW, Baba Gangnath Marg, Munirka, New Delhi-110067





Ashish Sharma &lt;ashish.sharma.css@gmail.com&gt;

**Fw: Fwd: Regarding scheduling of Video Conference meeting with NIN Nodal Officers during first week of January 2018**

1 message

**Satchitra Pani** <skpani2001@yahoo.com>

Thu, Dec 28, 2017 at 6:19 PM

Reply-To: Satchitra Pani &lt;skpani2001@yahoo.com&gt;

To: Ashish Sharma &lt;ashish.sharma.css@gmail.com&gt;, Hunny Wadhwa &lt;hunnywadhwa2307@gmail.com&gt;

Cc: Amit Kumar &lt;amitkumariss34@gmail.com&gt;, Amita Vaid &lt;amita.telemedicine@gmail.com&gt;, "S.C.Rajeev" &lt;sc.rajeev72@nic.in&gt;

Regards

S.K. Pani  
Under Secretary(eHealth)  
M/o Health & Family Welfare  
Room No 112 D, Nirman Bhawan,  
New Delhi  
Tel: 011-23061213  
Mobile: 09810115874

----- Forwarded Message -----

**From:** S.C.Rajeev <sc.rajeev72@nic.in>**To:** us Pani <skpani2001@yahoo.com>**Sent:** Thursday, December 28, 2017, 6:15:54 PM GMT+5:30**Subject:** Fwd: Regarding scheduling of Video Conference meeting with NIN Nodal Officers during first week of January 2018

pl. put up urgently

----- Original Message -----

**From:** **Gaurav Sharma** <gaurav.sharma@nihfw.org>**Date:** Dec 28, 2017 12:21:28 PM**Subject:** Regarding scheduling of Video Conference meeting with NIN Nodal Officers during first week of January 2018**To:** "S.C.Rajeev" <sc.rajeev72@nic.in>**Cc:** US SK Pani <skpani2001@yahoo.com>, hunny wadhwa <hunnywadhwa2307@gmail.com>, Ankit Tripathi <ankit\_tripathi11@hotmail.com>

Dear Sir,

As discussed during the CHI Review meeting meeting with JS(LA) held on 20/12/2017, one of the action point was to arrange a VC with State/District NIN nodal officers in the first week of January 2018.  
PFA the draft Letter for communicating with State for the same.

**Enclosure:**

1. Draft Letter for State
2. DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016

--

**Regards****Gaurav Sharma**

Deputy Director,

Centre for Health Informatics, NIHFW

Ministry of Health and Family Welfare, New Delhi

M: +919810053463

के बी अग्रवाल  
अपर सचिव भा.प्र.से.  
**K B Agarwal**  
IAS  
Additional Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
**Government of India**  
**Ministry of Health & Family Welfare**

Z-18015/1/2016-eGov  
Date: 3<sup>rd</sup> February, 2016

**Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).**

Dear Colleagues,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) / [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login . There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by 7<sup>th</sup> March, 2016.

With Regards,

Yours Sincerely

(K B Agarwal)

1. Principal Secretaries (Health) of States/UTs
2. MD of NHM of States/UTs

**S. C. RAJEEV, ITS**  
DIRECTOR



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110108  
Government of India  
Ministry of Health & Family Welfare  
Nirman Bhavan, New Delhi - 110108  
Tel. : +91-11-23062205  
Fax : 91-11-23062205  
E-mail : sc.rajeev72@nic.in

D.O. No. Z-18015/1/2016-eGov  
Dated 02<sup>nd</sup> January, 2018

**Subject: Regarding scheduling of Video Conference meeting with NIN Nodal Officers on 19<sup>th</sup> January 2018.**

Dear Sir,

As you may be aware, the Ministry of Health & FW has initiated a process for generating **National Identification Number for all Health Facilities of India** (NIN-2-HFI). NIN will be random but unique 10-digit number within India. In order to identify the geographical location of the health facility, attributes like state, district and taluka, village codes based on MDDS (Meta Data & data Standards) will be attached to NIN.

2. The Ministry of Health and Family Welfare (MoHFW) has already assigned NIN to each health facility covered under MCTS. In this regard, all states have been advised to complete the verification of all their health facilities with their attributes on NIN portal. Communicated vide DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016 (Copy enclosed).

3. During review of the progress in the above matter, it has been noticed that some States are yet to complete verification of existing Health Facilities in their respective States (status attached).

4. It is to inform that a video conference meeting has been scheduled under the chairmanship of Shri Sanjeeva Kumar, Additional Secretary(Health), MoHFW with all States & UTs on 19<sup>th</sup> January 2018 at 10.30 AM. eHealth Programme will also be reviewed in the meeting. In respect of NIN, the following will be discussed in the meeting:

- a) Updating states about their status under NIN
- b) Any issues / challenge / suggestion by states during the verification of existing Health Facilities on NIN portal.
- c) Future action points for NIN



**National Health Mission**

5. Therefore, all the NIN nodal officers of States/UTs are requested to complete the verification process at the earliest and have the latest status about NIN with them during the VC meeting. You may please contact Sh. Ankit Tripathi, Additional Director, CHI (Email: [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in); Mobile: 7838363525) in case of any queries.

With regards,

Yours sincerely,

  
(S. C. Rajeev)

To  
Mission Directors, NHM of all States/UTs

Copy to:

- 1) Principal Secretary (Health) of All States / UTs
- 2) NIN Nodal Officers of All States / UTs



के बी अग्रवाल  
अपर सचिव भा.प्र.से.  
**K B Agarwal**  
IAS  
Additional Secretary



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
**Government of India**  
**Ministry of Health & Family Welfare**

Z-18015/1/2016-eGov  
Date: 3<sup>rd</sup> February, 2016

**Subject: National Identification Number to Health Facilities of India (NIN-to-HFI).**

Dear Colleagues,

I am happy to inform you that Ministry of Health & FW has initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added as and when such need arises.

2. The Centre for Health Informatics has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility.

3. MCTS Facility Master has been taken as base for generating the NIN. Since NIN will be permanent unique 10 digit number, verification of health facilities and their attributes is essential. Software has been facilitated to verify the base data. Once base data is verified, NIN will be permanent for that Health Facility and all the Health Applications will use NIN in their databases to ensure inter-operability among applications.

4. NIN-to-HFI application is available at <http://nin.nhp.gov.in>. You are requested to nominate a Nodal officer for obtaining NIN Portal Credentials for verification from National Coordinator, National Coordination Unit, Centre for Health Informatics, New Delhi (Email: - [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in) / [at@nihfw.org](mailto:at@nihfw.org) ). User manual for this application is available to the users once they login . There will be two stage verification process at State and District level.

5. I would request you to complete this task as one of your top priority items as the exercise needs to be completed by 7<sup>th</sup> March, 2016.

With Regards,

Yours Sincerely

(K B Agarwal)

1. Principal Secretaries (Health) of States/UTs
2. MD of NHM of States/UTs



Receipt No : 773745/2018/E-GOVERNANCE

S.No.	State Name	Total	Confirmed Count by District officer	Verified Count by State Nodal officer	Confirmed %	Verified %	Facilities not confirmed	Facilities not verified
1	Arunachal Pradesh	878	878	860	100.0	97.9	0	18
2	Daman & Diu	34	34	34	100.0	100.0	0	0
3	Goa	256	256	256	100.0	100.0	0	0
4	Lakshadweep	25	25	25	100.0	100.0	0	0
5	Mizoram	573	573	573	100.0	100.0	0	0
6	Nagaland	797	797	796	100.0	99.9	0	1
7	Puducherry	135	135	135	100.0	100.0	0	0
8	Rajasthan	19558	19558	19558	100.0	100.0	0	0
9	Tripura	1215	1215	1206	100.0	99.3	0	9
10	West Bengal	11755	11754	11754	100.0	100.0	1	1
11	Telangana	6062	6061	6061	100.0	100.0	1	1
12	Chhattisgarh	6534	6530	6522	99.9	99.8	4	12
13	Jharkhand	4867	4862	4861	99.9	99.9	5	6
14	Bihar	13752	13733	13728	99.9	99.8	19	24
15	Tamil Nadu	15393	15365	15348	99.8	99.7	28	45
16	Odisha	8626	8607	8606	99.8	99.8	19	20
17	Haryana	4230	4216	4215	99.7	99.6	14	15
18	Assam	6947	6922	6545	99.6	94.2	25	402
19	Meghalaya	807	804	804	99.6	99.6	3	3
20	Delhi	3627	3613	3433	99.6	94.7	14	194
21	Karnataka	13583	13511	13454	99.5	99.1	72	129
22	Maharashtra	14299	14177	14155	99.1	99.0	122	144
23	Uttarakhand	2551	2524	2273	98.9	89.1	27	278
24	Uttar Pradesh	30358	29991	29820	98.8	98.2	367	538
25	Chandigarh	73	72	72	98.6	98.6	1	1
26	Madhya Pradesh	13577	13348	13312	98.3	98.0	229	265
27	Andhra Pradesh	9915	9659	9543	97.4	96.2	256	372
28	Dadra & Nagar Haveli	107	104	96	97.2	89.7	3	11
29	Sikkim	242	235	235	97.1	97.1	7	7
30	Manipur	531	488	484	91.9	91.1	43	47
31	Gujarat	11187	10086	5352	90.2	47.8	1101	5835
32	Punjab	4295	3810	3691	88.7	85.9	485	604
33	Kerala	7273	6231	6163	85.7	84.7	1042	1110
34	Jammu & Kashmir	3887	3276	2717	84.3	69.9	611	1170
35	Himachal Pradesh	4719	3892	3317	82.5	70.3	827	1402
36	Andman & Nicobar Islands	165	113	0	68.5	0.0	52	165
	<b>Total</b>	<b>222833</b>	<b>217455</b>	<b>210004</b>	<b>96.6</b>	<b>94.2</b>	<b>5378</b>	<b>12829</b>

Most Immediate  
Speed Post

No. T-12011/45/2017-NCD-1/BC.  
Government of India  
Ministry of Health & Family Welfare  
Department of Health and Family Welfare  
[NCD-1/BC Section]

Nirman Bhawan, New Delhi  
Dated 26.12.2017

**Meeting Notice**

Subject: - Review of health programmes through Video Conferencing on 19.01.2018 through NIC.

Sh. Sanjeeva Kumar, Additional Secretary (Health) in the Ministry will review the physical and financial progress of the following health programmes with the respective State Health Secretaries and Mission Directors on 19.01.2018 at 10.30 AM to 1.30 PM through Video Conferencing at Nirman Bhawan, New Delhi:

1. National Programme for Control of Blindness & Visual Impairment (NPCB&VI)
2. National Mental Health Programme
3. E-Health Programme

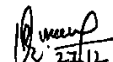
The following agenda points will be discussed in the Video Conferencing:

1. Amount allocated to State in 2016-17 and expenditure incurred.
2. Allocation in ROP 2017-18 – amount of expenditure and percentage of expenditure incurred till date with reference to ROP.
3. Reasons for poor expenditure and steps taken by State
4. Physical Progress – Physical progress of the approved programme activities
5. NGO liabilities (if applicable) – amount projected in PIP 2017-18 to clear NGO liabilities, amount allocated, and payments made, amount of pending liabilities of NGOs etc.
6. Any other issue related to implementation of the programme.

In this regard, please find enclosed herewith formats for furnishing the requisite details for review. It is requested that the requisite information as per the enclosed format may please be furnished to the undersigned by 02.01.2018 positively for smooth conduct of the Video Conferencing.

Kindly make it convenient to attend the Video Conferencing on the allotted date and time.

A copy of the VC id allotted by NIC, Nirman Bhawan for Video Conferencing is also enclosed for facilitating the conferencing.

  
(D.R. Meena)

Under Secretary to the Government of India  
Ph. No.011-23061342

To

1. Secretary (Health), Govt. of -----(All States/UTs)
2. Mission Director, Govt. of ----- (All States/UTs)
3. State Programme Officer (NPCB), (all States/UTs) for necessary of follow up action in the State.

Copy for follow up action to:

1. Director (ON), Mental Health Programme with the request to follow up the matter with the States/UTs in respect of Mental Health Programme with reference to the meetings notice.
2. Director (E-Health) with the request to follow up the matter with the States/UTs in respect of E-Health Programme with reference to the meetings notice.

Copy for information to:- PPS to Secretary (H)/PPS to AS (H)/PPS to JS (LA)/PS to DDG (O)/PS to DS(ZSV)/AC(NPCB)/US (NMHP)/US(e-Health)

राष्ट्रीय स्वास्थ्य एवं परिवार कल्याण संस्थान  
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन एक स्वायत्तशासी संस्थान)



The National Institute of Health and Family Welfare

(An Autonomous Institute under Ministry of Health & Family Welfare, Government of India)

बाबा गंगनाथ मार्ग, मुनीरका, नई दिल्ली-110 067

दूरभाष (कार्यालय): 91-11-26165959, 26166441, 26188485, 26107773

फैक्स: 91-11-26101623, ई.मेल: info@nihfw.org

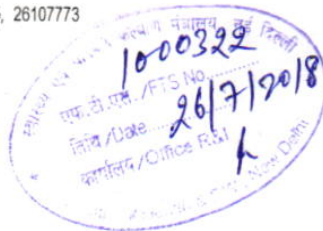
वेब साइट: www.nihfw.org

Baba Gangnath Marg, Munirka, New Delhi-110 067

Phones: 91-11-26165959, 26166441, 26188485, 26107773

Fax: 91-11-26101623, E-Mail: info@nihfw.org

Web Site: www.nihfw.org



No: NIHFw/CHI/e-Gov/NIN/2015

Date: 16/07/2018

3044343

To,

Director

eHealth Division, Nirman Bhawan, MoHFW

New Delhi-110001

110108.

Subject: Request to call the next meeting of the committee constituted for implementation of NIN - reg.

Sir,

This is with reference to the office order no. M-12013/2/2015-eGov dated 7<sup>th</sup> January, 2016, in which a committee with following composition for providing strategic and technical guidance to Centre for Health Informatics (CHI) for implementation of National Identification Number (NIN) to Health Facilities across India (HFI) was constituted under chairmanship of Additional Secretary, eGov/eHealth.

- |       |  |   |                  |
|-------|--|---|------------------|
| (i)   | Additional Secretary (eGov/eHealth)      | - | Chairman         |
| (ii)  | Joint Secretary (eGov/eHealth)           | - | Member           |
| (iii) | Director (eGov/eHealth)                  | - | Member           |
| (iv)  | Representative of Stats. Division, MoHFW | - | Member           |
| (v)   | Representative of NIC (Health)           | - | Member           |
| (vi)  | Representative of NHSRC                  | - | Member           |
| (vii) | Additional Director (CHI)                | - | Member Secretary |

2. In this regard it may be informed that phase-I of NIN (i.e. to include public facilities of India) has been implemented successfully for public Health facilities and as on date, NIN has been assigned to 2,23,191 public health facilities in NIN to HFI system. The Application Programming Interface (API) has been developed to provide master registry of public health facilities to different health-IT applications of MoHFW such as CPHC-NCD, RCH, NHPS, MCTS, IDSP, NPCB, NCCVMRC etc.

3. Since, the NIN system is running fine as master registry for public health facilities therefore we may look forward to initiate phase-II of NIN project (i.e. to include Private health facilities). Accordingly, draft Business Requirement Document (BRD) has been prepared (enclosed herewith) for kind perusal and approval of the above mentioned committee.

4. In order to decide the way forward of NIN to HFI initiative, it is requested that a meeting of the above Committee may be convened at the earliest to decide the way forward of NIN system.

Yours sincerely,

(Ankit Tripathi)

Additional Director

Centre for Health Informatics (CHI)

272 D

4832/CHF  
20/7/18

Dr (E Health)

30/7/18  
ASO (Ch. Ashish)

170928

File No. M-12013/2/2015-eGov  
 Government of India / भारत सरकार  
 D/o Health and Family Welfare/ स्वास्थ्य एवं परिवार कल्याण विभाग  
 e-Governance Section / (ई गवर्नेंस अनुभाग)  
 \*\*\*\*\*

निर्माण भवन, नई दिल्ली  
 दिनांक: 07<sup>th</sup> जनवरी, 2016

**ORDER**

**Subject:** Constitution of committee for providing strategic and technical guidance to CHI for implementation of National Identification Number (NIN).

The Ministry of Health and Family Welfare has initiated a process for generation of National Identification Number (NIN) for all Health Facilities of India (NIN-2-HFI). The Centre for Health Informatics (CHI)/ NHP (NIHFW) has been appointed as a nodal agency for generation and implementation of NIN to all Health Facilities with effect from 20th November, 2015.

2. With approval of Secretary (HFW), it has been decided to constitute a committee with the following composition for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN across India:

(i)	Additional Secretary (eGov)	-	Chairman
(ii)	Joint Secretary (eGov)	-	Member
(iii)	Director (eGov)	-	Member
(iv)	Smt. Deepti Srivastava (Director, Stats)	-	Member
(v)	Shri Sunil Kumar (STD, NIC)	-	Member
(vi)	Shri Amit Mishra (Consultant, NHSRC)	-	Member
(vii)	Shri Ankit Tripathi (Addl. Director CHI, NIHFW)	-	Member Secretary

*(जितेंद्र अरोड़ा)*  
 (जितेंद्र अरोड़ा)  
 निदेशक (ई गवर्नेंस)

स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
 फोन : 23062317

To

1. All members of the Committee
2. Director, NIHFW : The committee would be serviced by CHI.



BRD\_NIN-to-HFI\_VERSION\_0.2

# **National Identification Number to Health Facilities of India (NIN-to-HFI)**

## **Business Requirement Document (BRD)**

(Draft)



Centre for Health Informatics (CHI)  
The National Institute of Health and Family Welfare,  
Baba Gang Nath Marg, Munirka,  
New Delhi – 110 067 Ph. No: 26165959 Ext-262





BRD\_NIN-TO-HFI\_VERSION\_0.2

## Contents

DOCUMENT HISTORY .....	3
DISTRIBUTION LIST .....	3
ABBREVIATIONS .....	4
1. REQUIREMENT DEFINITION .....	5
1.1 OBJECTIVE .....	5
1.2 ABOUT NIN:.....	5
1.3 HIGH LEVEL REQUIREMENT .....	5
1.4 CURRENT FUNCTIONALITY.....	7
1.5 BENEFITS OF NIN:.....	7
2. REQUIREMENT ANALYSIS.....	7
2.1 PROPOSED SOLUTION .....	7
2.2 PROPOSED BUSINESS PROCESS (TO BE DIAGRAMS) .....	9
3. EXTENDED FUNCTIONALITIES .....	9
4. WORKFLOW DOCUMENTS .....	14
5. TECHNICAL REQUIREMENT .....	15



BRD\_NIN-TO-HFI\_VERSION\_0.2

## Document History

Version	Date	Author	Revision Description
0.1	24-MAY-2018	Abhinav Saini	Initial draft
0.2	30-MAY-2018	Vijay Kumar, Nitish Arya, Amit Kumar	Revised document

## Distribution List

Name	Role	Action Required
S.C. Rajeev	Director, eHealth, MoHFW	Business Requirement Specifications Document Sign Off
Ankit Tripathi	Additional Director	Business Requirement Specifications Document Sign Off
Vijay Kumar	Consultant	Review
Kishor Mogulluru	Project Manager	Review



BRD\_NIN-TO-HFI\_VERSION\_0.2

## Abbreviations

MoHFW	Ministry of Health & Family Welfare
NIN	National Identification Number
MDDS	Meta Data & Data Standards
CHI	Centre for Health Informatics
MFL	Master Facility List
DBT	Direct Benefit Transfer
CEA	Clinical establishment act
PMU	Program Management Unit
CMO	Chief Medical Officer
BPHC	Block primary Health care
NIN-2-HFI	National Identification Number to Health Facility Institute



BRD\_NIN-TO-HFI\_VERSION\_0.2

## 1. Requirement Definition

### 1.1 Objective

The objectives of the program are:

- To create a comprehensive system that is consistent, with a prominent National identification number registry of all health facilities (Public/Private) pan India.
- Unique National identification number (NIN) to all public and private facilities will be used further to avail government scheme benefits and subsequently NIN can be linked to other Health Application/ databases to ensure interoperability among applications etc.
- To facilitate the creation of information of national health infrastructure.

### 1.2 About NIN:

- The Ministry of Health & Family Welfare (MoHFW) has initiated a program for generating National Identification Number to all Health Facilities of India (NIN-to-HFI).
- NIN is a random and unique 10-digit number (based on LUHN algorithm) assigned to public health facilities within India.
- NIN is assigned to health facilities in order to identify their geographical location and additional attributes like State, District, Taluka (Sub- District), Blocks based on MDDS (Meta Data & Data Standards).
- The Centre for Health Informatics (CHI) has been appointed as the Nodal Agency for implementing NIN-to-HFI within India.
- The NIN portal is developed to confirm and verify the physical existence of the facilities and its attributes.
- Once base data is verified, NIN will be permanent identifier for that Health Facility and subsequently all linked Health Applications can use NIN in their databases to ensure interoperability among applications.

### 1.3 High level Requirement

- The requirement is to register and create repository of authentic Master Facility List (MFL) and validated demographical, geographical and localized administrative data of all public and private health facilities currently operating in India
- To generate a unique random National Identification Number i.e. NIN for each facility which has registered on the portal.
- In order to identify the geographic location of the health facility, attributes like state, district, taluka, village based on LG (local government) codes will be attached to NIN.



BRD\_NIN-TO-HFI\_VERSION\_0.2

#### 1.4 Current Functionality

- i. At present the NIN Portal has first page as the login page.
- ii. Only State Nodal officer and District users (One for each district) can access this application with help of the user credential provided to the state Nodal officer from National Coordination Unit, Centre for Health Informatics, New Delhi.
- iii. These users have been assigned to verify and confirm the facility existence and other details as per the facility format.
- iv. Change Password: User cannot reset the password through the portal, the NCU team manually changes the password once they receive a request for 'change password'.
- v. User Management: provides the functionality to view user, add user, edit user details and delete the user
- vi. Health Facility Management: Various options are provided to the website visitor to explore such as- to view Health Facility, add Health Facility, and edit Health Facility, Delete Health Facility

#### Role of District Officer:

The district officer needs to 'Confirm/validate' the existence of Health Facility and its attributes, i.e. Name, Address, Mobile no., Latitude-Longitude etc.

#### Role of State Nodal Officer:

The State Nodal Officer will 're-Verify' the Health Facility and its attributes with the data and artifacts available with State government.

#### 1.5 Benefits of NIN:

- To facilitate interoperability between various linked healthcare applications.
- To help in facilitation & tracking of Govt. of India's, Direct Benefit Transfer (DBT) scheme, where patients get financial reimbursements through hospitals.
- To determine geographical concentrations of Health facilities through maps feature i.e. NIN will be able to show coverage area of health facilities in a selected region.
- To connect with various information systems for sharing health facility data through open APIs/Web Services.
- To facilitate alerts to the users through email, SMS for any facility details whenever entered/ searched in the portal.

## 2. Requirement Analysis

### 2.1 Proposed Solution

- 2.1.1 The MoHFW has a requirement to create a single web portal for generating NIN for all government and the private health facilities across India.





BRD\_NIN-TO-HFI\_VERSION\_0.2

- 2.1.2 Any user can visit the portal and can log in (using previously created user Id's) or create a new ID for new visitors.
- 2.1.3 The new user will enter his mobile number for authentication and this will be used as a field to verify if the user has already registered with CEA/RSBY/OTHERS. Details from CEA/RSBY/OTHERS form can be extracted or else if the user is not registered then the user will be required to fill forms for confirming the details. The user will be given a temporary/application/reference number.
- 2.1.4 A registered user will log in to the portal using his ID and can view registration form, status, update contact information and email ID etc.
- 2.1.5 The form filled by private health facility applicant needs to be verified by district and state level approver before generating NIN.
- 2.1.6 The higher authority user assign the work to their subordinated for a specific time period but the final approval will be done by the respective officer only. He can't delegate the "approval authority" to his subordinate. The highest authoritative user can be district official and the lower is field agent.
- 2.1.7 The health facility Status will be categorized in five types-
  - Functional
  - Closed
  - Duplicate
  - Invalid
  - Non-functional
- 2.1.8 The system should also send a notification to district official regarding regular verification of the registered facilities in that district at periodic intervals.
- 2.1.9 The system will have following types of users:
  - Super user
  - State user
  - District user
  - Other user
  - Guest user
  - Demo user
  - Applicant user
- 2.1.10 The NIN web portal will have the following sub-sections.
  - Add facility
  - Dashboard
  - Reports
  - User management



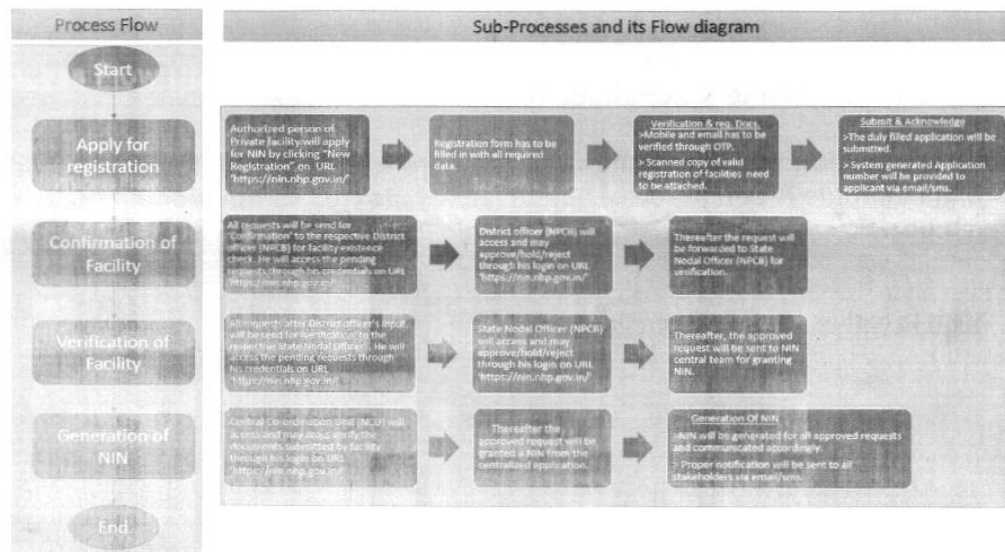
BRD\_NIN-TO-HFI\_VERSION\_O.2

- Directory of Nodal Officer

2.1.10 Please refer to **Annexure 1** for form fields details for applicant registration.

## 2.2 Proposed Business Process (To Be Diagrams)

### Process Flow Diagram:



## 3. Extended Functionalities

- Standard location fields:** The new NIN system must be in compliance with LG codes and MDDS code (census 2001, 2011). NIN system should maintain index for integration and data sharing through API.
- LG code for villages:** The LG codes for the villages should also be maintained in NIN system for completion. It will enable the mapping of the facilities based in the rural pockets (rural PHCs, sub-centers and private health care providers).
- Validation of email IDs and mobile numbers:** It is mandatory to have a validated email address and mobile number with each and every account. The validation needs to be done via URL and OTP validation. Every new user must get a greeting email and SMS on the decided periodicity from NIN.
- Forgot Password:**  
In case user forgets his account credentials, this functionality will facilitate him to retrieve his credentials i.e. User-ID and Password.



BRD\_NIN-TO-HFI\_VERSION\_0.2

- Step 1:** Click on 'forgot password' link;
- Step 2:** Enter your registered email ID/mobile number and click 'Submit';
- Step 3:** For valid email/mobile, it should display the message: 'the credentials has been sent to the registered email ID [vijayxxxxxx@gmail.com](mailto:vijayxxxxxx@gmail.com) and mobile number xxxxxx1212.'
- Step 4:** Email and SMS will be sent to the registered user with their ID and password details.
- Step 5:** In cases where e-mail/mobile is invalid, it should display the message as 'the email/mobile details provided is not registered, please provide the registered email/mobile' or contact the National PMU at [support@nin.nhp.gov.in](mailto:support@nin.nhp.gov.in)

## 5. Validation of Latitude & Longitude of all health facilities:

i. Mobile application will be common to all users of NIN portal. It will be used to capture the Latitude & Longitude of health facility, as well as functionality available from web portal:

### a. Steps to capture information on Online Mode:

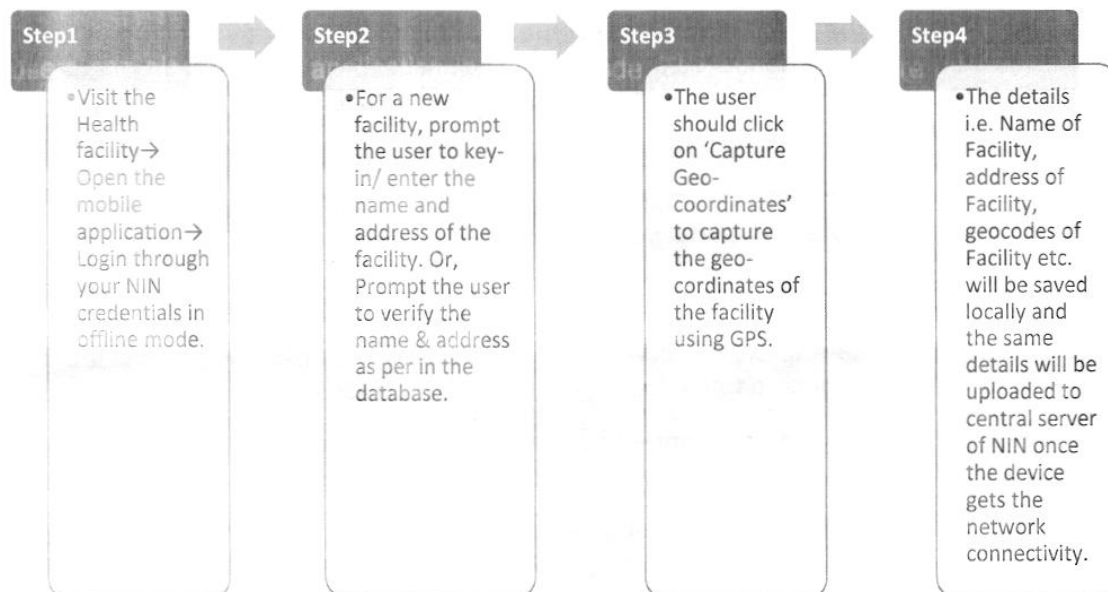




BRD\_NIN-TO-HFI\_VERSION\_0.2

b. Steps to capture information in Offline Mode: (Store & Forward method)

Users can also use the application in offline mode. The steps to capture information in offline mode are mentioned below:



ii. **Web portal to validate the existing latitude & longitude of health facilities:**

This application will ensure the quality of available data in your NIN database. As the existing latitude & longitude will prompt the exact location where the health center is located.

**Step1** – This application should access the latitude & longitude details using Google geolocation API or any other location API.

**Step2** – Plot the geo codes to the map and retrieve the associated address.

**Step3** – Compare the map generated address and address provided to the Nodal officers. Start matching in the following sequence as State, District, Sub-district, Block/Taluka, Village, Area / locality name, road name, pin code etc.

**Step4** – At the end it should generate a comprehensive report stating each line of record with matching percentage assigned to them.

**Step5** – All those records with less matching % will be considered for revalidation from the respective District officer and State Nodal office.

6. **Demonstration of Private and public health facility separately on dashboard:**  
Currently, dashboard shows the data of only public health facilities having NIN. This will



BRD\_NIN-TO-HFI\_VERSION\_0.2

be extended to include private health facilities as well. We can track all the private facilities in the same pattern like total no., verified, confirmed and not verified categories.

7. **Specialty wise representation of facilities:** We can store specialties information in NIN database for every health facility. This will be used to provide a search in following manner. When someone clicks on a particular specialty from the list, all the available facilities available in the particular areas will be displayed.

8. **User Access control & rights assignment:** NIN portal access will be provided to the block/district level personnel so that application verification process will be smooth. However, responsibility will be of nodal officer/ CMO of the district to ensure that the rights are correctly assigned.

9. **Quick links:** Quick link for e-mails, reference websites like clinical establishment, RSBY can be added to the web portal links page.

10. NIN portal will be linked with a Geo-tagging NIN app to allow health facilities to upload/view geo-tagged photos. Geo-tagged photos & scanned documents uploaded to NIN DB through mobile app will be searchable by a number of parameters including latitude, longitude, date, time, caption, category, state, district etc.

11. For a health facility, every scanned document/image uploaded to the portal must be approved by CMO/NPCB nodal officer for a NIN-ID to be generated.

12. All the documents & application information uploaded to the NIN portal by any user can be searched, downloaded & printed by CMO. Format for the printed information will be defined as needed.

13. NIN mobile app & web portal may also have following features:

- a. Display user profile information,
- b. Notifications from NIN Server,
- c. Application tracking status,
- d. Document Upload/Download/Print,
- e. Allow printing of physical application form

14. CMO should be able to monitor progress of the registration activities undertaken by NPCB officials for all the health facilities. Progress of health facility registration related activities will be monitored using action status like a.) No action required, b.) Action initiated, c.) Approved, d.) Under progress e.) Completed, f.) Closed

15. CMO should be able to keep track of the hierarchy of subordinate officials undertaking the verification activities for the state through NIN portal.

16. CMO should be able to issue notifications (text/pdf/image format) to all the health facilities registered in the state.





BRD\_NIN-TO-HFL\_VERSION\_0.2

17. CMO should be able to cancel the registered NIN ID of a health facility, by citing proper reasons like duplicate NIN ID, non-existing facilities etc.
18. CMO should be able to view the related statistics & reports as tables/graphs on per day, per month and yearly basis.
19. Representation of Temporary and permanent NIN-ID should define its process lifecycle within the system and should be generated within a deterministic timeframe.
20. Robust algorithms should be implemented to detect fake and duplicate health facility information at every step of the registration process.
21. NIN portal should have various system log levels for all the user and admin activities.
22. NIN portal should be made mobile responsive.
23. NIN portal usage related help manuals should be available and downloadable through respective user logins. FAQ section can be provided.
24. CEA has already defined the categories of private health facilities including mobile clinics and Physiotherapy facilities, same categories may be used. More options to add in certification dropdown - physiotherapy registration certifications or other services like Occupational therapy, audiology, speech therapy to be included in registration column.
25. Mobile alerts/Email alerts (In case the verification/Authentication process delayed more than predefined timelines) to concerned person for the Authentication such as Block level PHC MO (details from user IDs of BPHC, CMO, SMO , may be mapped at back end and alerts processed). This will improve the verification process workflow.
26. After new user filling the registration form, popup notification for ex "Your application submitted and check for status after .....days. (Predefined time lines may be given to each level at the process).
27. While the user checks for the status: option for status ex: 'Applied for registration status verification at Block level/at district level/ at state level' or 'Allotted NIN number' etc. should reflect on the NIN web portal/ application.



BRD\_NIN-TO-HFI\_VERSION\_0.2

## 5. Technical Requirement

The NIN portal and the underlying software components should be developed following the tier based model. The preferred development model & methodology would be N-tier based. Underlying technical components to be used are listed as below and follow the industry best practice incorporating additional functionalities and add-ons.

### Software Architecture Model

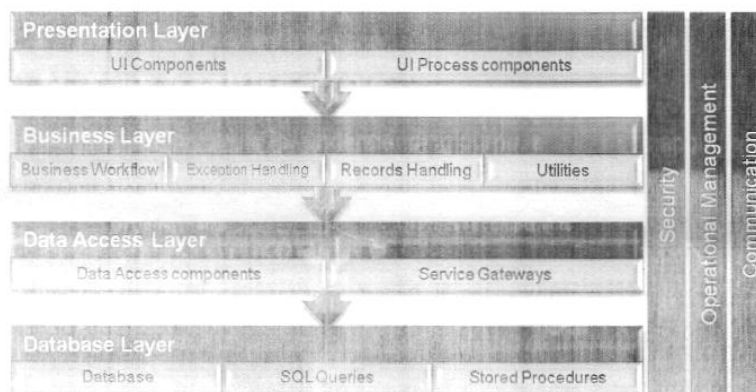
N-Tier architecture is an industry-proven software architecture model. It is suitable to support big client-server applications by providing solutions on scalability, security, fault tolerance, reusability and maintainability. NIN portal will use this model during software development.

It should have the mentioned Layers in place

- **Presentation Layer**
- **Business Layer**
- **Data Access Layer**
- **Database Layer** in place.

The mentioned diagram is for understanding purpose, can be changed as needed.

### N-Tier Architecture





BRD\_NIN-TO-HFI\_VERSION\_0.2

Annexure 1

Section	Fields Name	Data Types	Mandatory
Facility			
	Facility Name	Text	Yes
	Facility Type	Drop Down	Yes
Address			
	House Number /Building Number /Plot Number / Building Name	Text	Yes
	Street/Mohalla/Sector Name/Number	Text	Yes
	Minor/Major Landmark	Text	Yes
	Locality (Area Number/ Area Name/Suburb /Sub district in case of Village)	Text	Yes
	State	Drop Down	Yes
	District	Drop Down	Yes
	Taluka/SubDistrict	Drop Down	Yes
	Health Block	Drop Down	Yes
	Pincode	Number	Yes
Contact Information			
	Applicant Name	Text	Yes
	Landline Number	Number	Yes
	In-Charge Mobile No.	Number	Yes
	Alternative In-Charge Mobile No.	Number	No
Geocode			
	Latitude	Float Number	Yes
	Longitude	Float Number	Yes
	Altitude (In meters)	Float Number	Yes
Region			
	Region Indicator (Rural/Urban)	Drop Down	Yes
	Operational Status	Drop Down	Yes
	Ownership Authority	Drop Down	Yes
Specialty			
	List of Various health specialties	Drop Down	Yes

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

भारत सरकार/ Government of India  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय/ Ministry of Health  
and Family Welfare  
ई- गवर्नेंस अनुभाग/ e-Governance Section

\*\*\*

File No. Z-18015/1/2016-eGov

FTS: 3044343

**Matters related to National Identification  
Number(NIN) Implementation**

(Relevant papers has been transferred  
from File No - M-12013/2/2015 -eGov  
FTS : 130241 )  
to this file in original

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

File No. M-12013/2/2015-eGov

FTS: 130241

Subject: National Identification Number to Health Facilities of India (NIN-2-HFI).

FR is an e-mail communication dated 19<sup>th</sup> November 2015 received from Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFV in reference to the NIN implementations for seeking a formal approval from MoHFW to start the NIN implementation from GOA.

2. It is gathered from the e-mail that AS (KBA) has directed CHI of NHP to start the the process of NIN implementation from GOA and subsequently in West Bengal as soon as possible. In this regard, a meeting was held with Sh. Sunil Kumar, Sr. Technical Director, NIC on 6th November 2015 at NIC HQ (minutes of the meeting may be seen at P. 132 /C).

3. A copy of a D.O letter dated 05.11.2015 from AS (KBA) to Shri Sharat Chauhan, Commissioner and Secretary (Health & FW), Government of Goa is also placed at 'F/A'.

Submitted please.

आशीष शर्मा  
आशीष शर्मा 14/11/15  
सहायक (ई-गवर्नेंस)

सहायक निदेशक (ई-गवर्नेंस)

आश्विनी कुमार  
19/11/15

डाक्टर सचिव (ई-गव.)

सुनीता दौंडियाल  
19/11/2015

निदेशक (ई-गव.)

A letter is to be given to "NHP" for para 2, and decision taken in the meeting put up a D.O.

जिनेस शर्मा  
19/11/15

अ.स. (ई गव.)

A draft is placed below for approval pls.

निदेशक (ई.गव.)

आश्विनी कुमार  
1/12/15

The meeting regarding NIN implementation was held on 23.11.15 under the chairmanship of AS(eGov). Draft minutes of the meeting are placed on file for approval please.

जिनेस  
1/12/15

AS (KBA)

Minutes are OK.

PPU a self contained note for perusal of Secretary (HFW).

Dir (e-gov)

AS (eGov)

Pl issue minutes & letter  
1/12/15  
2/12 AS (eGov)



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

**Subject: National Identification Number (NIN) for Health Facilities**

A comprehensive note on National Identification Number (NIN) for Health Facilities is placed below. This note outlines need for NIN, its features, implementation plan and status as on date.

**Need delineation:**

2. In view of the key challenge highlighted in Health MMP DPR that health information & patient records with different health IT systems remain trapped in silos (having virtually no inter-operability) in absence of a common identifier in the different databases, detailed discussions were held with different divisions, states and NIC.

3. After detailed discussions & consultation, it was envisaged to generate and assign unique number i.e. National Identification Number (NIN) to each of the health facilities (both public & private) in order to facilitate interoperability and information exchange between different IT systems. It is also critical for creation of electronic health records of citizens and establishment of Integrated Health Information Platform.

**Key features:**

4. The key features of NIN are as follows:

- Random & unique 10 digit number generated for each health facility (public & private)
- Last digit is the checksum and the rest nine digits are the random number generated.
- Compliance with the MDDS
- Health Facility means all Government, Private including allopathic, Ayurveda, Homeopathy, Sidha, Unani, Yoga Hospitals, clinics, diagnostic laboratories, blood banks etc.
- Minimum Attributes to be captured in NIN State, District, Sub-District, Village/ Ward/ Town/ City, Government/ Semi-Government/ Private, Area: Rural/Urban, Address

**Envisaged Action Plan:**

5. The envisaged action plan for implementation of NIN includes the following key steps:

- Verification of data related to Health Facilities from different sources (regarding public health facilities)
- Allocation of National Identity Number (NIN) to each Health Facility
- All ICT Systems in Health Sector (Central, State, Private) will use NIN prospectively in new systems in order to achieve interoperability and seamless information exchange
- States /UTs will need to take necessary steps to incorporate NIN in their existing health IT systems
- Integration with Clinical Establishment Registration & Regulation System (CERRS)

6. In line with the above action plan, the implementation time-frame is planned in two phases as follows:

**Phase 1 – December 2015 – March 2016**

- NIN Generation at the centre (public health facilities) - December, 2015
- States to validate the NIN numbers generated for at least 90% of the Government health facilities- March 2016



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

- States to generate NIN for atleast 50% of Private facilities - March 2016
- States to ensure that NIN is implemented in all new IT systems from FY 2016-17

**Phase 2- March 2016- December 2016**

- States to ensure "NIN" is incorporated in all legacy health IT systems

**Implementation approach:**

7. NIN generation would be controlled and managed centrally by MoHFW through an appropriate structure & set-up. Implementation activities for NIN would be overall co-ordinated by Centre for Health Informatics (CHI). CHI would work with NHSRC for various activities at state-level.

8. Manpower team would be hired at central level for development and implementation coordination. For execution of the required tasks at state-level, team of 5-8 persons at each state (depending on size of state- number of health facilities, IT applications running etc.) would be supported by MoHFW.

9. A web based application for generation of NIN and further addition of new health facility, modification of attributes of a facility, disabling of health facility, addition of new attribute etc. would be developed. Through the web service, health facility can apply for NIN generation and allocation.

**Financial implications:**

10. Costs involved (like software development, manpower, administrative etc.) in NIN implementation are being worked out in consultation with CHI, NIC, NHSRC etc. & would be ready by 7.12.15. A discussion on the preliminary costs estimate has already been held with JS(eGov) and the same is being reworked based on the points discussed.

**Progress till date:**

11. The progress till date for NIN is outlined as follows:

- The process of the generation of NIN number has been initiated by CHI in collaboration with NIC based on MCTS database, as MCTS database of health facilities is MDDS compliant (in terms of various attributes to be captured).
- Pilot in Goa has been completed for NIN generation & verification for government Health facilities
- Development of web-based application (including for verification of health facilities by states) is underway & expected to be completed by 7.12.15.

Submitted for your kind information.

(Jitendra Arora)  
Dir. (eGov)

JS(SS)

AS (KBA)  
Secretary

The above position (from proposal) brings out the necessity for generating NIN numbers for each health facility in India. The approach and road map for this is also brought out.

For kind information.

AS (KBA)

27/12/15

(Jitendra Arora)  
Dir. (eGov)

The above position (from proposal) brings out the necessity for generating NIN numbers for each health facility in India. The approach and road map for this is also brought out.

For kind information.

AS (KBA)

27/12/15

AS (KBA)

Secretary (H&FW)  
13000  
07/12/15

27/12/15

27/12/15

27/12/15

27/12/15

27/12/15

27/12/15

27/12/15

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

- 4 -

Ministry of Health & Family Welfare  
e-Governance Division

**Subject:** Registry of Hospitals in Network of Insurance (ROHINI) by Insurance Information Bureau of India (IIB) -regd.

Shri Sunil Sharma, JS (e-Governance), Ministry of Health & Family Welfare along with other officials from the Ministry attended the recently organised FICCI 8th Annual Health Insurance Conference: 'Creating Value through Customer Centricity', during 9 - 10 Dec 2015

2. During the course of the conference it came to knowledge that the Insurance Information Bureau (IIB) of India has launched a registry of 32,651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlements. They have collaborated with GS1 India; promoted by the Ministry of Commerce for providing hospitals a **13 digit globally unique ID** and Geo coding is being done based on their address. It was also informed under the above mentioned initiative that Hospital Self Service Portal will allow hospitals to register and edit information and provide an electronic exchange of medical records between hospitals and insurance companies to ensure faster claims processing. (Briefed at F/A)

3. With a similar objective, MoHFW is also in the process of assigning unique **National Identification Number (NIN)** to all health facilities in India which is a **10 digit number**.

4. In this context, It is proposed that a meeting may be scheduled with officials of IIB to understand the system of ROHINI beforehand to evaluate convergence of efforts and address potential challenges: (we may ask FICCI to organize meetg with between MoHFW & IIB.)

Submitted for directions please.

JS(ss)

As proposed at 'A'.

JS  
24/12/15

Dis (e Gov)

Note No. #1

Attachment: 2017/3/2749\_1489551048417.pdf

FTS: 130241

**Subject: Manpower and Infrastructure proposal of CHI for NIN Implementation.**

FR is a communication dated 15th December 2015 received from Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFW addressed to Director (eGov). Centre for Health Informatics (CHI) has been engaged for National Identification Number Implementation (NIN) in India vide letter no. F No. M-12013/2/2015-eGov dated 1st December, 2015.

2. The CHI need to setup a National/ Central Coordination Unit and the unit should have technical manpower along with ePMU team. Therefore, Shri Ankit Tripathi has proposed the following before initiating the work related to NIN under Centre for Health Informatics:

(i) ePMU/PMT through National Institute for Smart Governance (NISG) for the purpose of immediate start of the project with the following structure:

- |                          |          |
|--------------------------|----------|
| a. Project Lead          | - 1 No.  |
| b. Consultants           | -- 2 No. |
| c. Associate Consultants | - 2 No.  |

(ii) Necessary sitting space with internet connection, telephone connections (initially 3) with conference facility and STD facility and other related infrastructure is required for ePMU Team at CHI. Suitable space may be rented outside to carry on the expanding work from MoHFW on various eGovernance activities.

(iii) One dedicated vehicle required for the transportation of officials to coordinate in various events of eGovernance division of MoHFW like NIN and other eGovernance related work on daily basis.

3. Further, Shri Ankit Tripathi has requested to constitute a committee under the chairmanship of AS (eGov) for providing strategic and technical guidance to Centre for Health Informatics (CHI) for the implementation of NIN, across India. As per discussion with him, the following structure of the committee is proposed:

AS (eGov)	-	Chairman
JS (eGov)	-	Member
Dir(eGov)	-	Member
Ms Deepti Srivastava (Director, Stats)	-	Member
Shri Sunil Bhushan (STD, NIC)	-	Member
Shri Ankit Tripathi, CHI, NIHFW	-	Member
Shri Amit Mishra (Consultant, NHSRC)	-	Member

(Member Secretary)

4. Submitted for approval on para 2 and 3 please.

अश्विनी शर्मा  
(अश्विनी शर्मा) 30/12/15

सहायक अनुभाग अधिकारी (ई गवर्नेंस)

सहायक निदेशक (ई गवर्नेंस)

अवर सचिव (ई गवर्नेंस) - अवकाश पर

निदेशक (ई गवर्नेंस) - अवकाश पर

संयुक्त सचिव (ई गवर्नेंस)

सचिव (ई गवर्नेंस)

Secy (NHP)

AS (KBA)

JS (SS)

4/1/16



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf


Ref. notes on prepage.


2. Secretary (HFW) has approved the setting of a PMU in CHI, NHFW for implementation of NIN across India. He has also given his approval for the sitting space, infrastructure & vehicle ~~as~~ as mentioned on prepage required for this project. We may convey the same to NHFW & CHI.
3. Secretary (HFW) has also approved the constitution of the committee to provide strategic & Technical Guidance to CHI for implementation of NIN across India. We may convey NHFW/CHI that the committee would be serviced by CHI.
4. With ref. to para 2 & 3 above, Draft-I & Draft-II (<sup>draft</sup> constitution order of the committee) is placed below for approval please.

अवर सचिव (रि. ग. म.)

Dir (e-Gov)

AD (eGov)

  
 5/1/16

  
 5/1/16
अजित कुमार  
6/1/16

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

Ministry of Health & Family Welfare  
e-Governance Division

**Subject:** Registry of Hospitals in Network of Insurance (ROHINI) by Insurance Information Bureau of India (IIB) -regd.

The Insurance Information Bureau (IIB) of India has launched a registry of 32,651 unique hospitals called Registry of Hospitals in Network of Insurance (ROHINI) to ease inefficiencies in claim settlements. They have collaborated with GS1 India; promoted by the Ministry of Commerce for providing hospitals a **13 digit globally unique ID** and Geo coding is being done based on their address. It was also informed under the above mentioned initiative that Hospital Self Service Portal will allow hospitals to register and edit information and provide an electronic exchange of medical records between hospitals and insurance companies to ensure faster claims processing. (Briefed at F/A)

2. With a similar objective, MoHFW is also in the process of assigning unique **National Identification Number (NIN)** to all health facilities in India which is a **10 digit number**. And for Goa it has been completed as a pilot.

3. To achieve convergence between ROHINI and NIN a meeting was held with Shri R. Raghawan, C.E.O, Insurance Information Bureau of India at 11.30 AM on 13.01.2016 with Additional Secretary (eGov). The meeting was also attended by Shri Jitendra Arora, Director (eGov), Shri Sunil Kumar, Senior Technical Director, NIC and Shri Chandrasen Srivastava, Project Lead, ePMU.

4. In the meeting Shri Raghawan briefed about the project Rohini and their action plan. He was also briefed about NIN by Shri Sunil Kumar.

5. Based on the discussion, it was decided that the team working on NIN from MoHFW may visit IIB office in Hyderabad to interact with their technical team in order to understand feasibility of convergence/co-working.

6. Thereafter, it is proposed that the following officers from MoHFW may visit IIB, Hyderabad during 24-25 January 2016.

- Shri K.B Aggarwal, AS(eGov)
- Shri Jitendra Arora, Director (eGov)
- Shri Sunil Bhusan, STD, NIC, MoHFW
- Shri Anant Tripathi, AD, CHI, NIHFW

Submitted for approval please.

*Jitendra Arora*  
14/1/16  
Jitendra Arora)  
Director (eGov)

*JS (SS) on leave*

*A' is approved.*

*AC (KBA)*

*JS (eGov)*  
*AD (eGov)*

*14.1.16*  
*As per discussion with*  
*CEO, IIB Fresh date will be*  
*intimated by him*  
*Jitendra*  
*18.1.16*



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

**Subject: National Identification Number to Health Facilities of India (NIN-2-HFI).**

Ministry of Health & FW has initiated a process for generating National Identification Number (NIN) for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number with in India.

2. In order to identify the geographic location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. More attributes as per requirements can be added whenever required. The Centre for Health Informatics has developed the web application to generate NIN-2-HFI. End-users will be able to confirm by giving NIN through central database and will display its available attributes, if found correct. This site is developed to confirm and verify the existence of the health facility centres.

3. All the health facility as per MCTS Master Data has been given NIN. The NIN needs to be verified from state and district level. Therefore, a D. O. draft letter for NIN verification at state level has been on file for approval please.

*Jitendra Arora*  
27/1/16  
(Jitendra Arora)  
Director (eGov)

*JS/JS*  
*AS (KBA)*  
*Jitendra*  
3-1/16

*JS/JS*

*Dir (e Gov)*

*PS to AS (KBA)*

*AS (KBA)*

*Sir, DFA for approval from Dir (eGov).*  
2-1/16

*1/2/16*

*Revised send you by email  
Pl get signed the letter*

*Jitendra*  
2/4/16

*AD (eGov)*  
9/2/16

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

File. No. Z-18015/1/2016-eGov

FTS: 3044343

**Subject: Proposal for adoption of Global Location Number (GLN) as National Identification Number (NIN) for Hospital Identification.**

FR is a proposal submitted by GS1 India, August Kranti Bhawan, Bhikaji Cama Place, New Delhi for adoption of Global Location Number (GLN) as National Identification Number (NIN) for hospital Identification.

2. As mentioned in the FR, GS1 India is a joint industry initiative set up in 1996 and is promoted by the Ministry of Commerce, Govt. of India to spread awareness and provide guidance on adoption of global standards by Indian Industry for the benefit of consumers, Industry, Government and is a Society under the Registrar of Societies.

3. GS1 system of Standards provides the comprehensive framework that ensures interoperability between healthcare stakeholders. GS1 India is recommending adoption of GLN (global location number) as National Identification Number(NIN) for unique and universal hospital identification based on GS1 global standards.

4. Each hospital will be allocated a globally unique 13 digit code, which will enable universal and unique identification of the hospitals. GLN consist of country code, location reference and a check digit. The 13<sup>th</sup> digit (last digit) of the number is called check digit which makes sure that the number is correctly composed.

5. GLN is an unambiguous unique number used worldwide that will act as a key to retrieve the information associated with hospitals. A detailed model of GLN is mentioned in the Proposal.

Submitted please.

आशीष शर्मा  
(आशीष शर्मा) 16/3/2016

सहायक अनुभाग अधिकारी(ई गवर्नेंस)

सहायक निदेशक (ई गवर्नेंस)

अवर सचिव (ई गव) सीमा 17/3/16

अमित कुमार  
16/3/16

निर्देश (ई गव)

As per several discussion held on this subject, we may go ahead with the 10 digit "NIN" as suggested by Deptt of GS1 system.

श्रीम  
17/3/16

Office of Secretary (H&FW)  
e-office No. 3044343  
Date 21/03/2016

JS(eGov)

सुनील शर्मा  
17/3

AS (KBA)

जे के अ

Seey (HFW)

21/3

AS (KBA)

21/3

JS(eGov)

22/3

AD(eGov)

सुनील शर्मा 22/3/16  
(निदेशक (eGov)) JS(eGov)

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

Z-18015/1/2016-eGov

FTS: 3052722

Government of India  
Ministry of Health & Family Welfare  
(eGovernance Section)

\*\*\*\*

**Subject: HMIS-MCTS Facility- List Mapping Exercise for implementation of NIN**

PUC is an email communication dated 17.03.2016 from Dr. Amit Mishra, Sr. Consultant, NHSRC, vide which he has apprised that NHSRC is better positioned to integrate the data available on MCTS and HMIS portal since they have closely worked with the both HMIS and MCTS since its inception; also as part of MDDS work they have conducted technical assessment of both the system for integration. The NHSRC has also been part of the implementation of both these systems and knows the technical boundaries which these systems need to bridge to be able to exchange data.

2. This work requires manual sanitization of data. In addition, consensus and approval on standard definitions would be required to manage master facility data-base.

The following will be the deliverables:-

- Mapping of HMIS and MCTS facility masters with NIN.
- Identifying mismatches and duplicates and suggest standard process of verification.
- Provide list of all facilities of MCTS (including NIN) along with the attributes of HMIS where they map.
- Develop standard definitions for attributes of NIN.
- Suggest a roadmap for updation of NIN data-base by users.

3. As per his estimation, this task will require 4 constant for two months period. Two consultants would come from health IT background and 2 from public health background. The approximate cost of this work as per NHSRC rates would be around 8 Lakh.

Submitted please.

*Amit Kumar*  
18/3/16  
Amit Kumar  
AD (eGov)

Dir(eGov)

*We may go ahead with NHSRC as discussed in the review meeting. The task is to be completed by JS/As may kindly approve*

*18/3/16*

*JS (SS)*

*Approved*

*18/3/16*

*Sec (eGov)*



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

FTS: 3044343

**Subject: Engagement of NHRSC, New Delhi for facility master data integration of MCTS & HMIS Portal for implementation of NIN to all Health facilities across India.**

National Health System Resource Centre (NHSRC), New Delhi was engaged for facility master data integration of MCTS & HMIS portal for implementation of National Identification Number (NIN) to all health facilities across India via D.O letter dated 18<sup>th</sup> March 2016 (Placed at F/A). NHSRC confirmed the acceptance of the work via communication dated 22nd March 2016.(Placed at F/B)

2. FR is a communication from NHSRC forwarding the requirements for the completion of aforementioned work. NHSRC has informed that two months of work by four people (2 Public Health consultants; 1 IT Architect- consultant and 1 senior Functional Health IT expert). As per the NHSRC norms, total cost for the assignment would be Rs. 8,01,900 (Rs. Eight Lakh One thousand Nine hundred only).

3. NHSRC has requested the Ministry to release the aforementioned fund. Since, Ministry has already given fund to CHI of NHP, NIHFV for various ehealth initiatives including NIN implementation, we may request NIHFV to transfer the required fund to NHSRC for undertaking the work. DFA please.

आशीष शर्मा  
(आशीष शर्मा) 5/4/2016  
सहायक अनुभाग अधिकारी(ई गवर्नेंस)

अवर सचिव (ई. गव.)  
सौम्या  
6/4/16

निर्देशक (ई. गव.)

सुनील शर्मा  
6/4/16

निर्देशक (ई. गव.)

Arjun

सहायक निर्देशक (ई गवर्नेंस)

आरुण कुमार  
5/4/16

For approval please  
Arjun  
6/4/16

As advised

Arjun  
9/4/16

Note No. #1

-12- Attachment:/2017/3/2749\_1489551048417.pdf

F No. Z-18015/1/2016-eGov

FTS: 3044343

**Subject: Request to map 7 Health Districts with Facilities**

FR is a communication from Ms. Sanghamitra Ghosh, Mission Director, NHM, West Bengal addressed to Shri K.B. Agarwal, Additional Secretary, MoHFW informing that The Government of West Bengal has notified Seven more Health Districts (Listed in FR), in addition to Twenty districts already reflected in the NIN portal.

2. Ministry of Health and Family Welfare has already approved the District Programme Management Units under National Health Mission. Ms Ghosh has requested the Ministry to issue necessary instructions for inclusion of 7 (Seven) Health Districts.

Submitted Please.

आशीष शर्मा

(आशीष शर्मा) 12/4/2016

सहायक अनुभाग अधिकारी (ई गवर्नेंस)

For direction, pl.

सहायक निदेशक (ई गवर्नेंस)

अमित कुमार  
12/04/16

अवर सचिव (ई-गव)

12/4/16

Dir (e Gov)

Smt. Deepi Sarkar, Director (S/6-6)

may like to see, whether  
the matter pertains to  
e Gov division or not ??अमित  
13/4/16

The matter is related to creation of NIN for newly created health districts & this is being done by eGov div. / NHM.

Deepi  
18/04/16

Dir (eGov)

Forward it to CHIT

अमित  
22/4/16

AD (eGov)

A draft has been prepared &amp; is placed below for approval pls.

अमित  
20/4/16

Dir (eGov)

AD (eGov)

अमित  
20/4/16



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

**Sub: Proposal to achieve convergence between 10 digit NIN database and 13 digit ROHINI Database in order to achieve inter-operability.**

Reference noting on page No. 9/N:

2. Ministry of Health & FW has already initiated a process for generating National Identification Number for all Health Facilities of India (NIN-2-HFI). NIN will be random but unique 10 digit number within India. In order to identify the geographical location of the health facility, attributes like state, district, taluka, village codes based on MDDS (Meta Data & Data Standards) will be attached to NIN initially. The Centre for Health Informatics (CHI) has developed the web application to generate NIN-to-HFI. End-users will be able to confirm by giving NIN through central database and will confirm its available attributes, if found correct. This site has been developed to confirm and verify the existence of the facility by state Govt. as per DO letter dated 03.02.2016 issued to States. (F/X). NIN-to-HFI application is available at <http://nin.nhp.gov.in>. So far around 1.4 lacs out of 2.0 lacs health facilities have been verified by states. (F/Y)

3. The Insurance Information Bureau (IIB) have collaborated with GS1 India, promoted by Ministry of Commerce for providing hospitals a 13 digit globally unique ID and Geo coding is being done, based on their address. (F/Z) Under this initiative, Hospital Self Service Portal will allow hospitals to register and edit information and provide an electronic exchange of medical records between hospitals and insurance companies to ensure faster claims processing.

4. A meeting was held with GS1 India officials on 26<sup>th</sup> April 2016 at MoHFW in my chamber to discuss the allocation of National Identification Number (NIN) to Government and Private Health Facilities across India. The two applications were discussed in detail and it has been agreed that there two system are required to be interlinked in order to achieve uniformity and inter-operability and to avoid allocating two sets of numbers to Private health care facilities.

5. Thus each Hospital in the Country can be allocated a **unique 13 digit code**, which will enable universal and unique identification of the Hospitals in a manner, so that national level interoperability between government and private health facilities can be achieved in a following manner :

i. MoHFW will upgrade the existing 10 Digit National Identification Number (NIN) for healthcare facilities which are under the Central and State Health Departments/ Government departments to 13 Digit number according to GS1 format by prefixing '290' without any financial implication.

The code starting with 290' series will be the Restricted Internal Circulation only in India as it works in closed loop within India. The following formula will be used for the generation of 13 digits: 290 + 9 digits random number +1 check digit.

Prefix	NIN	Check Sum	NIN : 13 Digit Format
290	277728537	9	2902777285379
290	132887577	4	2901328875774

The required changes would be carried out in the NHP software application to accommodate this coding structure. However International interoperability will not be achieved in this case, for that we require to adopt '890' series of GS1 India which has some cost implications.

Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

ii. Each private healthcare facilities/ Hospitals / clinics/diagnostic centres will be allocated a unique 13 digit code starting with '890' series from the GS1 India/IIB Registry. GS1 India is currently using the 3 digits code '890' in front of all private health facilities 'GS1 number'. MOHFW will adopt this 13 digit unique GLN number being allotted for Private Health Facilities by IIB into its various applications (such as NHPS) as National Identification Number based on GSI standards.

iii. An application will be created wherein the list of all Private Health facilities allotted with GS1 number and list of all Government Health facilities allotted with NIN number can be interchanged and accessible across two portals. ROHINI data can be made available in National Health Portal and vice versa using the Unique ID's (NIN and GLN). *Global location number*

iv. CHI will develop an interface which will redirect all private health facilities to GS1 India web page for obtaining NIN-to-HFI and GS1/ IRDA will share the web services with CHI to maintain the registry of private hospitals in NIN platform. The present platform configuration of CHI-NIN platform and GS1-IRDA platform is almost same (i.e. Linux Operating System, Apache Server, MySQL Database, PHP) hence the API integration will be easier in this case. Interoperability with ROHINI portal and National Health Portal through an API will be established.

6. With the above initiatives the two applications would be interlinked in order to achieve uniformity and inter-operability and allocating two sets of numbers to Private health care facilities will be avoided.

Submitted for approval please.

*Jitendra Arora*  
20/6/16  
(Jitendra Arora)  
Director(eGov)

*JS(ss)*  
*AS(KBA)*  
*21/6/16*

PI discuss urgently.

*21-6-16*

*JS(eGov)*  
*Dir(eGov)*  
*STD/NIC (Sunil Shukla)*

Discussed. Approved as proposed, with the rider that '890' will be prefixed only with the verified health facilities' NINs.

*JS(eGov)*  
*As (eGov)*  
*AD(eGov)*

*22/6/16*

*22/6/16*

*22/6/16*



Note No. #1

Attachment:/2017/3/2749\_1489551048417.pdf

Z-18015/1/2016-eGov

FTS: 3044343

**Subject:** Status update and request for extension on "Facility master data integration on MCTS & HMIS Portal for implementation of NIN to all Health facilities across India"

National health System Resource Centre (NHSRC) was engaged for two months for integration of facility master data of HMIS and MCTS portal for implementation of National Identification Number (NIN) to all health facilities across India via D.O. letter dated 18<sup>th</sup> march 2016 (At F/A). FR is a communication from Dr. Sanjiv Kumar, Executive Director, National Health Systems Resource Centre (NHSRC), MoHFW sharing the current status of the aforementioned task.

2. As on 5<sup>th</sup> June 2016, NHSRC has completed HMIS-MCTS Facility Master mapping exercise for 21 states and output has also been shared with States. For other 7 States work is in progress and for the remaining 8 States, mapping and district-wise arrangement of data is yet to be done. The activity wise status and challenges are mentioned in annexure to FR.

3. Shri Sanjiv Kumar has also mentioned the tasks related to NIN that are to be completed on priority as discussed in the meeting held with JS(eGovernance) on 27<sup>th</sup> May 2016 and subsequent discussions with CHI-NIN Team on 2<sup>nd</sup> June 2016.

4. Since the task of completion of HMIS and MCTS mapping and district-wise rearranging of data for remaining states and Developing Standards for NIN as well as Supporting NIN data validation will take some time, Shri Sanjiv Kumar has sought an extension of two months for this assignment.

Submitted Please.

आशीष शर्मा  
23/6/2016  
(आशीष शर्मा)

सहायक अनुभाग अधिकारी (ई गवर्नेंस)

विचारार्थ प्रस्तुत है,

सहायक निदेशक (ई गवर्नेंस)

अवर सचिव (ई. गव.)

आशुतोष कुमार  
23/6/16

सोमा  
23/6/16

निर्देश (ई. गव.)

"X" for extension may kindly be offered

गति  
23/6/16

डॉ. सजिव (ई गव.)

सुनील शर्मा  
23/6

निदेशक (ई गव.)

जिनेश्वरी  
24/6/16

सुनिवेशक (ई गव.)

Note No. #1

- 16 - Attachment:/2017/3/2749\_1489551048417.pdf

Z-18015/1/2016-eGov

FTS: 3044343

**Subject: Request for approval of funds for NIN Workshop at NEIGRIHMS, Meghalaya.**

FR is a letter dated 20<sup>th</sup> June, 2016 from Shri Ankit Tripathi, Additional Director, CHI of NHP, NIHFW stating that the North Eastern States are facing some difficulties during the verification process on NIN Portal.

2. In this view of the above there is a need to conduct one day technical training cum workshop at NEIGRIHMS, Meghalaya. The following officials from CHI, NIHFW will conduct the training session with NIN nodal officers from 8 North Eastern States (Assam, Arunachal Pradesh, Meghalaya, Manipur, Mizoram, Manipur, Tripura and Nagaland):

- Shri Ankit Tripathi, Additional Director, CHI, NIHFW.
- Shri Saurabh Kumar, Associate Consultant, CHI, NIHFW.
- Shri Vineet Chawla, Software Developer, NICSI, CHI, NIHFW.

3. As per the discussion held with Dr Prithwis Bhattacharya, Nodal officer of Telemedicine, Shri Tripathi has apprised that NEIGRIHMS require the approval of financial expenditure and sanction of amount of Rs 3,55,500/- The detailed breakup of the amount is placed at 'F/A'.

4. In this regard, It has been observed that the cost estimates in proposal are at higher side. Also the option of videoconferencing for training may be evaluated. Through VC, 4-5 persons per state may be trained at a time and it will save the time and cost of the trainers & trainees in comparison to the training at NEIGRIHMS in which only one nodal officer per state will be trained.

Submitted please.

अमित कुमार  
24/6/16  
(अमित कुमार)

सहायक निदेशक (ई-गवर्नेंस)

अवर सचिव (ई-गवर्नेंस) सौरभ  
21/6/16

निर्देश (ई-गव)

Approval of JS (ARR) is solicited for making the expenditure from the GIA released to NEIGRIHMS Shillong by "Telemedicine Division" to conduct the workshop by CHI, NIHFW for allocation of impromptu Technical Training to Nodal officer for NE states.

JS (ARR) अमित  
21/6

JS (ARR)

Dir (CHI)

JS (ARR)

अमित  
21/6/16

AD (CHI)

Letter issued  
Amit

Note No. #1

Attachment: 2017/3/274801480551048417.pdf  
FTS: 3044343

Subject: Verification of Health facilities from HMIS-MCTS Facility Master - reg

This is in reference to National Identification Number to Health Facilities of India (NIN to HFI) implementation. The Centre for Health Informatics (CHI) has mapped MCTS facility master (NIN database) with HMIS facility master for all states. This mapping was conducted to identify common health facilities in both databases; identify and include health facilities which are currently not part of NIN database and identify and mark duplicates and non-functional facilities. The mapping will help standardize HMIS and MCTS Facility masters in line with NIN Database.

2. HMIS-MCTS Facility Master mapping sheets have been shared (in excel workbook) with respective State NIN Nodal Person.

3. State may be requested to get all the facilities verified. The verification process should result in following-

- List of common facilities in both databases,
- List of facilities which are currently not part of NIN Portal but are available in HMIS master- these to be entered into NIN Portal
- List of facilities which are non functional/duplicate/wrong entries in both databases- and if these are part of NIN Portal, they should be marked as non-functional/duplicate/wrong entry in NIN Portal.

4. Accordingly a draft DO letter to States is placed below for approval please.

*Amit Kumar*  
8/7/16  
(Amit Kumar)  
AD(eGov)

Dir(eGov)

Draft DO letter may be approved for sending to States for verifying the HMIS-MCTS facility master mapping sheets prepared by CHI/NHRSC.

*JS*  
8/7/16

*JS(ss)*

What all data updation / modification right have been given to states.  
Pl speak

*JS(eGov)*

All rights have been given to States an NIN portal for updating / verification of data bases of their respective States.

*JS(eGov)*

*JS*  
12/7/16

Email sent to S.P.  
Pl issued by JS

*JS*  
12/7  
AD(eGov)

Letter signed

*JS*

*JS*  
12/7/16



Note No. #1

Attachment: 2017/3/2749 - 1489551048417.pdf

**Subject: Approval of funds for NHSRC, New Delhi regarding mapping of MCTS and HMIS Facility Master.**

National health System Resource Centre (NHSRC) was engaged for integration of facility master data of HMIS and MCTS portal for implementation of National Identification Number (NIN) to all health facilities across India for two months i.e. 5th April 2016 to 5th June 2016 via D.O. letter dated 18th march 2016 (At F/A).

2. For completion of the aforementioned work, NHSRC had informed that two months of work by four people was required which amounted to Rs. 8,01,900/-. In view of this, Centre for Health Informatics (CHI), NIHFV was directed by MoHFW to transfer the required funds to NHSRC via communication dated 07.04.2016 (At F/B)

3. As per communication dated 10th June 2016 received from Shri Sanjiv Kumar, Executive Director, NHSRC (At F/C) had stated that as on 5th June 2016, NHSRC had completed HMIS-MCTS Facility Master mapping exercise for 21 States/UTs and output has also been shared with States/UTs. For other 7 States/UTs work was in progress and for the remaining 8 States/UTs, mapping and district-wise arrangement of data was yet to be done. Shri Sanjiv Kumar has sought an extension of two months for the assignment.

4. In the aforementioned letter dated 10th June 2016 in which Shri Sanjiv Kumar sought extension of two months i.e. from 5th June 2016 to 5th August 2016, but did not mention about any requirement of additional financial resources for the extended period and with the approval of Joint Secretary (eGov), extension for two months was given for completion of the project.

5. PUC is a communication dated 13th July 2016 from Prof. S.N. Sarbadhikari, Project Director, CHI forwarding the request of NHSRC for requirement of additional funds to the tune of Rs. 8,01,900/- as the cost of extension of this assignment.

6. File is submitted for consideration of the request of NHSRC for providing additional funds for the extended period. If considered, NHSRC may be strictly instructed for completion of assigned task within the extended period i.e. by 5<sup>th</sup> August 2016.

आशीष शर्मा  
(आशीष शर्मा)  
22/07/2016

सहायक अनुभाग अधिकारी (ई गवर्नेंस)

सहायक निदेशक (ई गवर्नेंस)

अनुराज साहू (ई.गव) - अवकाश पर

अमित कुमार  
22/7/16

निदेशक (ई.गव)

गति  
22/7/16  
Dir (eGov)

सं. नि. (eGov)

**Note No. #2**

15/03/2017 11:12 AM

AMIT KUMAR-AD  
(AD)**Note No. #3****Sub: Use of 13 Digit GS1 Codes for identification of Public Health Facilities**

Ministry of Health & Family Welfare (MoHFW) has initiated a process for allocation of unique identification number to health facilities. This is known as National identification Number (NIN) to Health Facilities and the portal which issues these numbers is termed as NIN Portal. NIN Portal uses random numbering system to allocate 10 Digit unique identification number for all health facilities based on the Luhn Algorithm. NIN Portal is expected to play role of Health Facility Registry in the country where it can be referred as single most reliable source for health facility related information. As of now, the portal has enrolled more than two Lakh Public Health Facilities and is growing.

2. It is stated that Insurance Information Bureau of India (IIBI) under Insurance Regulatory and Development Authority (IRDAI) in collaboration with GS1 India provides 13 digit GLN Codes to the networked private hospitals of insurance companies. It is therefore important that both ROHINI and NIN Portal use similar mechanism for identification of facilities irrespective of their ownership status and multiple identifiers for a facility should be avoided.

3. In this regard, a letter was written to CEO, IIBI for achieving convergence between 10 digit NIN and 13 digit GS1 code (copy enclosed). It was proposed to use "290" as prefix in the NIN to make it 13 digit code in line with GS1. However this is a local arrangement, this ID will be unique within India but not globally as there would not be compatibility between NIN and GS1 codes. However reply is still awaited.

4. To overcome the above challenge it is now proposed to use global competitive GLN codes for Public Health Facilities as well. Since NIN is going to function as Health Facility Registry in the country, it is important that both ROHINI and NIN use same identification process, where NIN Portal and ROHINI should be able to share data with each other.

5. It is being planned that under National Health Protection Scheme (NHPS) of MoHFW, many private hospitals would also be empanelled with government for health service delivery and will request to undergo the process of registration with NIN Portal. Under the above mentioned arrangement, private hospitals already enrolled with ROHINI may not require registration in NIN Portal and their GS1 code would be taken from ROHINI through facility data exchange similarly. New Private Hospitals that will be empaneled under NHPS would also be required to go through the registration process to get GS1 code.

6. NIN currently holds record of 2 Lakh public health facilities which may go up to a maximum of 3 Lakh. It is therefore proposed that we may write a letter to Joint Secretary, Commerce Ministry to obtain onetime cost for issuing global competitive GS1 codes to public health facilities to achieve interoperability.

7. A draft letter is placed in file for approval please.

22/03/2017 4:14 PM

JITENDRA ARORA  
(DIR)

**Note No. #4**

Approved.

12/04/2017 8:04 PM

SUNIL SHARMA  
(JS)

**Note No. #5**

No action required till final decision.

24/04/2017 4:39 PM

JITENDRA ARORA  
(DIR)

**Note No. #6**

04/09/2017 4:51 PM

AMIT KUMAR-AD  
(AD)

**Note No. #7**

13/09/2017 3:23 PM

HUNNY WADHWA  
(ASO)

**Note No. #8**

18/09/2017 2:49 PM

AMIT KUMAR-AD  
(AD)

**Note No. #9**

18/09/2017 3:38 PM

S K PANI  
(US)

**Note No. #10**

**Subject: Extension of ePMU team hired through NISG-reg**

[FR](#) is a letter dated 28<sup>th</sup> August, 2017 received from Additional Director, CHI requesting for extension of ePMU team hired through NISG for NIN and e-Health related initiatives. MoHFW had conveyed the approval vide letter no. [M-12013/2/2015-eGov dated 07th January 2016](#) to Centre for Health Informatics for hiring of manpower (5 persons) through NISG for creation of ePMU consisting Project Lead-1, Consultants-2 and Associate Consultants-2. All the ePMU staff hired through NISG are deployed in the CHi/MoHFW for the aforesaid

activities. As per agreed terms & conditions with NISG, CHI had released the amount of Rs. 73,47,517/- for a year to NISG on quarterly basis.

2. In this regard, Additional Director, CHI has informed that MoHFW vide letter mentioned above had not specified the period of ePMU team needs to be hired. Now, NISG has raised invoice for 1st quarter of 2nd year for human resource deployed for ePMU. The anticipated outlay for the 2nd year towards NISG for ePMU would be Rs. 1,12,63873/- (approximately). Therefore, CHI has requested this Ministry to give approval for extension of team of 5 manpower of ePMU team for another one year.

File is submitted for consideration please.



18/09/2017 4:49 PM

HUNNY WADHWA  
(ASO)

**Note No. #11**



18/09/2017 4:57 PM

S K PANI  
(US)

**Note No. #12**

JS may kindly approve the proposal for continuation of 5 consultants of ePMU team ( Project Lead-1, Consultants-2 and Associate Consultants-2) for a further period of one year through NISG.



20/09/2017 8:37 PM

JITENDRA ARORA  
(DIR)

**Note No. #13**



pl. discuss.



21/09/2017 9:44 AM

**LAV AGARWAL**  
(JS)

**Note No. #14**

Reference above noting :

The detail of the consultants working in CHI along with their work allocation is as below:

No.	Name/ Designation	Salary per month and Date of Joining	Work allotted
1	<b>Dr. Amit Mishra</b> Project Lead	<b>Rs. 1,45,800</b>  01-July-2016	<ul style="list-style-type: none"> <li>Working in e-Governance section of MoHFW</li> </ul>
2	<b>Mr. Manpreet Singh Sidhu</b> Consultant - Technical	<b>Rs. 1,18,800</b>  02-Aug-2016	<ul style="list-style-type: none"> <li>Involved in Integrated Health Information Platform (IHIP) Project.</li> <li>Coordinating in development of MoHFW mobile applications.</li> <li>Preparation of technical documents for Concept notes, DPR, SRS, RFP and bid process management</li> <li>Technical Consultation on server infrastructure Projects</li> <li>Any other tasks that may be required/ assigned by CHI/eGovernance Division, MoHFW</li> </ul>
3	<b>Prateek Agarwal</b>  Functional Consultant	<b>Rs. 1,14,000</b>  07-Feb-2017	<ul style="list-style-type: none"> <li>Involved in overall development of various Dashboard/s (Budget, PMSSY, ME, CD, MIS-Tool).</li> <li>Coordination with stakeholders/ users/ vendor on functional requirements related to Dashboards.</li> <li>Prepare periodic project status reports (i.e. Monthly Reports, Weekly Reports, Deviations</li> </ul>

			Report) • IEC Materials & Contents upload on National Health Portal • Inter-department coordination within MoHFW • Any other tasks that may be required/ assigned by CHI/eGovernance Division, MoHFW
4	<b>Jay Kumar Jha</b>  Associate Consultant	<b>Rs. 76,557</b>  16-Nov-2016	• Implementing and coordinating in activities like development of IT system for IDSP. • Managing and interacting with Social Media team for promotion on social media. • Managing the Tender and Bid evaluation process. • Managing the Architecture and Future updates for NHP Voice Web • Any other tasks that may be required/ assigned by CHI/eGovernance Division, MoHFW
5	<b>Saurabh Kumar</b>  Associate Consultant-IT	<b>Rs. 51,000</b>  22-March-2016	• Assisting in activities like NIN, PMSMA, Digital Publicity, Telemedicine • Follow up with States, Calling up stakeholders for identification of project Nodal Officers for NIN, Digital Payments • To assist in preparation of Expression of Interest (EOI) and Request for Proposal (RFP) documents of projects • Any other tasks that may be required/ assigned by CHI/eGovernance Division, MoHFW

The amount paid to NISG for the period of April,16 to June,17 was Rs. 73,47,571 in 3-4 installments.

In view of above clarifications , JS may kindly approve the proposal for continuation of 5 consultants of ePMU team ( Project Lead-1, Consultants-2 and Associate Consultants-2) for a further period of one year through NISG.



22/09/2017 6:06 PM

JITENDRA ARORA

(DIR)

**Note No. #15**



25/09/2017 6:10 PM

LAV AGARWAL  
(JS)

**Note No. #16**



25/09/2017 6:36 PM

JITENDRA ARORA  
(DIR)

**Note No. #17**



26/09/2017 9:43 AM

S K PANI  
(US)

**Note No. #18**

26/09/2017 12:03 PM

AMIT KUMAR-AD  
(AD)

**Note No. #19**

27/09/2017 2:27 PM

HUNNY WADHWA  
(ASO)

**Note No. #20**

04/10/2017 11:07 AM

S K PANI  
(US)

**Note No. #21**

03/11/2017 3:46 PM

HUNNY WADHWA  
(ASO)

**Note No. #22**

29/12/2017 1:03 PM

AMIT KUMAR-DD  
(DY.DIR)

**Note No. #23**

PUC is a email communication received from Shri Gaurav Sharma, Deputy Director, CHI referring to the CHI review meeting dated 20.12.2017 where it was decided to arrange a VC with State/ District NIN nodal Officers in the first week of January 2018.

2. Taking note of that, a draft has been prepared and is placed for approval please. Also, file is submitted for deciding the date on which the proposed VC is to be scheduled. After the date is finalised the same would be added to the D.O letter at the place highlighted in draft in yellow.

Submitted for finalization of the date and approval of draft please.

29/12/2017 2:30 PM

ASHISH SHARMA-II(EGOV)  
(ASO)

**Note No. #24**

29/12/2017 3:20 PM

**S K PANI  
(US)****Note No. #25**

letter has already been issued.

03/01/2018 3:55 PM

**S C RAJEEV  
(DIR)****Note No. #26**

08/08/2018 11:19 AM

**AMIT KUMAR-DD  
(DY.DIR)****Note No. #27****Subject: Request to call the next meeting of the committee constituted for implementation of NIN-reg**

FR is a [letter](#) received from Additional Director, CHI vide No-NIHFV/CHI/e-Gov/NIN/2015 dated 16.07.2018 wherein referencing the [Officer Order](#) dated 07.01.2016 in which a committee under Chairmanship of AS(eHealth) was formed for providing strategic and technical guidance to Centre for Health Informatics (CHI) for implementation of National Identification Number (NIN) to Health Facilities across India (HFI).

2. They have informed that phase-1 of NIN (i.e to include public facilities of India) has been implemented successfully for public Health facilities in NIN to HFI system. The Application



Programming Interface (API) has been developed to provide master registry of public health facilities to different health-IT applications of MoHFW such as CPHC-NCD, RCH, NHPS, MCTS, IDSP, NPCB, NCCVMRC etc.

3. As the NIN system is running fine as master registry for public health facilities, therefore CHI is looking forward to initiate phase-II of NIN project (i.e to include Private health facilities).

4. In this regard they have submitted a [draft Business Requirement Document \(BRD\)](#) for perusal and approval from the above mentioned committee.

5. Further, they have requested that a meeting of the above committee needs to be convened to decide the way forward of NIN to HFI initiative.

File is submitted for seeking convenience of AS(H) for the meeting of the committee to provide its inputs/comments on the draft Business Requirement Document (BRD) and if Draft BRD found in order, it may be approved by the committee.

08/08/2018 11:24 AM

HUNNY WADHWA  
(ASO)

**Note No. #28**

File is submitted for seeking convenience of AS(H) for the meeting of the committee formed to provide strategic and technical guidance to CHI for implementation NIN.

The committee will provide its inputs/comments on the draft Business Requirement Document (BRD) and if Draft BRD found in order, it may be approved by the committee.



08/08/2018 11:36 AM

AMIT KUMAR-DD  
(DY.DIR)

**Note No. #29**

pl spk

09/08/2018 7:52 PM

S C RAJEEV  
(DIR)

**Note No. #30**

As discussed, file is submitted for seeking convenience of AS(H) for the meeting of the committee formed to provide strategic and technical guidance to CHI for implementation NIN.

The committee will provide its inputs/comments on the draft Business Requirement Document (BRD) and if Draft BRD found in order, it may be approved by the committee.

A green rectangular stamp with a blue flame icon on the left and the text "Digitally Signed" in black.**13/08/2018 4:36 PM****AMIT KUMAR-DD  
(DY.DIR)****Note No. #31****15/08/2018 6:11 PM****S C RAJEEV  
(DIR)****Note No. #32**

a convenient date and time to review NIN may be given pl.

A green rectangular stamp with a blue flame icon on the left and the text "Digitally Signed" in black.**16/08/2018 9:57 AM****LAV AGARWAL  
(JS)****Note No. #33**

30.08.2018 at 11.00 AM.

A green rectangular stamp with a blue flame icon on the left and the text "Digitally Signed" in black.**17/08/2018 10:27 AM****SANJEEVA KUMAR  
(AS)****Note No. #34**



18/08/2018 5:49 PM

LAV AGARWAL  
(JS)

**Note No. #35**

19/08/2018 7:09 PM

S C RAJEEV  
(DIR)

**Note No. #36**

20/08/2018 2:01 PM

AMIT KUMAR-DD  
(DY.DIR)

D.O. no. Z-18015/1/2016-eGov

Dated: 28.12.17

**Sub: Regarding scheduling of Video Conference meeting with NIN Nodal Officers during first week of January 2018**

Dear Sir,

As you may be aware, the Ministry of Health & FW has initiated a process for generating ***National Identification Number for all Health Facilities of India*** (NIN-2-HFI). NIN will be random but unique 10-digit number within India. In order to identify the geographical location of the health facility, attributes like state, district and taluka, village codes based on MDDS (Meta Data & data Standards) will be attached to NIN.

The Ministry of Health and Family Welfare (MoHFW) has already assigned NIN to each health facility covered under MCTS. In this regard, all states have been advised to complete the verification of all their health facilities with their attributes on NIN portal. Communicated vide DO Letter No. Z-18015/1/2016-eGov, dated 27<sup>th</sup> January, 2016 (Copy enclosed).

Review of the progress in the above matter has revealed that some States are yet to complete verification of existing Health Facilities in their respective States. In this regard, a video conference meeting is being scheduled between for all the NIN Nodal Officers of all States & UTs **in the first week of January 2018**. The tentative agenda of the meeting would be:

- a) Updating states about their status under NIN
- b) Any issues / challenge / suggestion by states during the verification of existing Health Facilities on NIN portal.
- c) Future action points for NIN

Therefore, you are requested to arrange the availability of all the NIN nodal officers for the VC. You may please contact Sh. Ankit Tripathi, Additional Director, CHI (E: [ankit.tripathi@gov.in](mailto:ankit.tripathi@gov.in); M: 7838363525) in case of any queries.

With Regards,

Yours Sincerely,

(S.C. Rajeev)  
Director (eHealth)  
011-23062205

To

All Mission Directors, NHM

Copy to:

- 1) All Principal Secretary of States & UTs
- 2) All NIN Nodal Officers of States & UTs

